

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

Young for Iowa, Inc.

ADDRESS (number and street)

PO Box 162

Check if different than previously reported. (ACC)

Van Meter

IA

50261-0162

2. FEC IDENTIFICATION NUMBER ▼

C C00545616

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

IA

03

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 / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 Christopher Gunnare

Signature of Treasurer Christopher Gunnare

[Electronically Filed]

Date

/ /

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

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Young for Iowa, Inc.

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))....	120049.72	581125.08
(b) Total Contribution Refunds (from Line 20(d))	0.00	90.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	120049.72	581035.08
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	97342.76	740264.29
(b) Total Offsets to Operating Expenditures (from Line 14).....	2496.60	2496.60
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	94846.16	737767.69
8. Cash on Hand at Close of Reporting Period (from Line 27).....	87567.39	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	372801.55	

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

Young for Iowa, Inc.

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).....	64775.00	434426.41
(ii) Unitemized.....	3445.00	38399.51
(iii) TOTAL of contributions from individuals ▶	68220.00	472825.92
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	45500.00	82890.98
(d) The Candidate.....	6329.72	25408.18
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	120049.72	581125.08
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	250000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	250000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	2496.60	2496.60
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	122546.32	833621.68

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	97342.76	740264.29
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	500.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	90.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	90.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	97342.76	740854.29

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	62363.83
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	122546.32
25. SUBTOTAL (add Line 23 and Line 24).....	184910.15
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	97342.76
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	87567.39

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: F3A
Transaction ID :

This report is filed as amended in response to an RFAI dated 9/4/2014. The data entry of a previously reported loan of \$75,000 made by the candidate's personal funds was deleted and re-entered incorrectly in the committee's reporting software showing changes to the schedule C as originally filed. This report should correct the data entry and reflect the originally reported loan by the candidate.

Form/Schedule:
Transaction ID:

**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 50
	<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)
Young for Iowa, Inc.

A. Full Name (Last, First, Middle Initial)
James Rice

Mailing Address 6803 Rock Creek Ct

City Alexandria State VA Zip Code 22306-1220

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

Name of Employer US Senate Occupation Legislative Assistant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : AA094BA2EF6694A1FB78

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Gina Noll

Mailing Address PO Box 192

City Des Moines State IA Zip Code 50301-0192

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

Name of Employer Capital Knowledge Consulting, LLC Occupation Administration

Receipt For: 2014
 Primary General
 Other (specify) Convention2014

Election Cycle-to-Date
5041.28

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 20 / 2014

Transaction ID : A2BD541D1EDFD41FE9D5

Amount of Each Receipt this Period
2500.00

In-kind:administrative services

C. Full Name (Last, First, Middle Initial)
Angela Marozzo

Mailing Address PO Box 788

City Post Falls State ID Zip Code 83877-0788

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

Name of Employer Plummer Forest Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : A43560A61328F4E64A6B

Amount of Each Receipt this Period
2600.00

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

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

5350.00

**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 50
	<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)
Young for Iowa, Inc.

A. Full Name (Last, First, Middle Initial)
Robert James Kress

Mailing Address 155 NE 2nd St # 323

City Earlham	State IA	Zip Code 50072-7707
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FEC ID number of contributing federal political committee. **C**

Name of Employer Earlham Savings Bank	Occupation President
--	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : A0B9DBE2E2A6248AABC9

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Gerald Johnson

Mailing Address 24977 Ridge Rd

City Adel	State IA	Zip Code 50003-4657
--------------	-------------	------------------------

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

Name of Employer Holmes Murphy	Occupation Agent
-----------------------------------	---------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2014

Transaction ID : A79A4994D307346A2A03

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Darrell Jay Bauman

Mailing Address 4 Sunset Cir

City Adel	State IA	Zip Code 50003-1003
--------------	-------------	------------------------

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

Name of Employer Dallas County	Occupation Treasurer
-----------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2014

Transaction ID : AF70258AAA25D4C3C8AC

Amount of Each Receipt this Period
250.00

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 50
	<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)
Young for Iowa, Inc.

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

Mailing Address 31276 Champagne Rd

City Waukee	State IA	Zip Code 50263-7058
----------------	-------------	------------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify) **Convention2014**

Election Cycle-to-Date
7800.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 12 / 2014

Transaction ID : ADFE9CE6923C84EE88BF

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
HARRIET S MACOMBER

Mailing Address 630 41ST ST

City Des Moines	State IA	Zip Code 50312-2705
--------------------	-------------	------------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
825.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 28 / 2014

Transaction ID : AA893CF8307E747DEA4C

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
Joann Mardelle Johnson

Mailing Address 6724 Panorama Dr

City Panora	State IA	Zip Code 50216-8714
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FEC ID number of contributing federal political committee. **C**

Name of Employer State of Iowa	Occupation Superintendent of Credit Unions
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Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 28 / 2014

Transaction ID : A7CD335A5152943108F3

Amount of Each Receipt this Period
500.00

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

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

3175.00

**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 50
	<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)
Young for Iowa, Inc.

A. Full Name (Last, First, Middle Initial)
Jeffrey Grappone

Mailing Address 152 School St

City Concord State NH Zip Code 03301-2561

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

Name of Employer US Senate Occupation Communications Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 24 / 2014

Transaction ID : A48CE38C8A3E245E7BFE

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Gerald M Kirke

Mailing Address 5465 MILLS CIVIC PKWY

City West Des Moines State IA Zip Code 50266-5318

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

Name of Employer Kirke Financial Services Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4100.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 27 / 2014

Transaction ID : A544E8F2D9A5E425391A

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Clarke William Scanlon

Mailing Address 9525 Century Woods Cir

City Johnston State IA Zip Code 50131-2844

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

Name of Employer US Congress Occupation District Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : A6DD73C8738DC46A492D

Amount of Each Receipt this Period
1000.00

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 50
	<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)
Young for Iowa, Inc.

A. Full Name (Last, First, Middle Initial)
Diane M. Young

Mailing Address 31276 Champagne Rd

City State Zip Code
WAUKEE IA 50263-7058

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

Name of Employer Self Occupation Interior Designer

Receipt For: 2014
 Primary General
 Other (specify) Convention2014

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
06 / 12 / 2014

Transaction ID : AF9E84E03C76D43B89AF

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Stephanie Crowley

Mailing Address 1400 S 52nd St #19

City State Zip Code
West Des Moines IA 50265-5260

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

Name of Employer GCBS, Inc. Occupation Admin Staffing

Receipt For: 2014
 Primary General
 Other (specify) Convention2014

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
06 / 20 / 2014

Transaction ID : A289443EDD87B4A169DC

Amount of Each Receipt this Period
2500.00
In-kind:database management

C. Full Name (Last, First, Middle Initial)
Keith Denner

Mailing Address 917 57th Pl

City State Zip Code
West Des Moines IA 50266-6398

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

Name of Employer Self Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : A92F3274EFB424496991

Amount of Each Receipt this Period
2500.00

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

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

7600.00

**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 11 OF 50
	<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)
Young for Iowa, Inc.

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

Mailing Address 3000 S Randolph St
Apt 432

City State Zip Code
Arlington VA 22206-2256

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

Name of Employer Occupation
US Senate Staff

Receipt For: 2014
 Primary General
 Other (specify) Convention2014

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 12 / 2014

Transaction ID : AC04C60999DB6435296A

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Kayne B Robinson

Mailing Address PO Box 184

City State Zip Code
Marengo IA 52301-0184

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

Name of Employer Occupation
n/a Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 28 / 2014

Transaction ID : A5B535467F6A548A79A1

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Jill Oman

Mailing Address 1588 Burr Oaks Dr

City State Zip Code
West Des Moines IA 50266-6607

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

Name of Employer Occupation
n/a Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2014

Transaction ID : AE862E568C59943AC9D5

Amount of Each Receipt this Period
2600.00

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

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

3700.00

**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 12 OF 50
	<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)
Young for Iowa, Inc.

A. Full Name (Last, First, Middle Initial)
Micheal P Daggy

Mailing Address 1541 7th St

City Des Moines State IA Zip Code 50314-2808

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

Name of Employer McDonald Letter Service Occupation Printer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **475.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 29 / 2014

Transaction ID : A036263A2DEDE4EA0921

Amount of Each Receipt this Period
200.00

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

Mailing Address 3818 Thornton Ave

City Des Moines State IA Zip Code 50321-1814

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

Name of Employer AE Dairy Occupation Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 28 / 2014

Transaction ID : A30FCD6C4875F4D19BFA

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Stanley Reynolds

Mailing Address 300 Walnut St Ste 200

City Des Moines State IA Zip Code 50309-2262

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

Name of Employer Reynolds and Reynolds Occupation Insurance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 28 / 2014

Transaction ID : ACB31540A038A4B95941

Amount of Each Receipt this Period
1000.00

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

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

2200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 50
	<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)
Young for Iowa, Inc.

A. Full Name (Last, First, Middle Initial)
Mark Oman

Mailing Address 1588 Burr Oaks

City West Des Moines State IA Zip Code 50266-6607

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

Name of Employer n/a Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : AE1713FC055E74DF7A5E

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Mark Wampler

Mailing Address 16155 NW 16th St

City Slater State IA Zip Code 50244-8005

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

Name of Employer n/a Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify) Convention2014

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2014

Transaction ID : AD6FB6210F5AC4AB8BBF

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
3195304536 Paul A. Nelson

Mailing Address 489 Mitscher Street

City Milton State FL Zip Code 32570-4144

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

Name of Employer US Navy Occupation Student Naval Aviator

Receipt For: 2014
 Primary General
 Other (specify) Convention2014

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 17 / 2014

Transaction ID : A65601DE50287436FA1D

Amount of Each Receipt this Period
 100.00

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

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 50
	<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)
Young for Iowa, Inc.

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

Mailing Address 2233 290th St

City Blanchard	State IA	Zip Code 51630-4004
-------------------	-------------	------------------------

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

Name of Employer Midwest Search Group	Occupation CPA
--	-------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : AE158F4E03D364EB998A

Amount of Each Receipt this Period
500.00

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

Mailing Address 141 37th St

City Des Moines	State IA	Zip Code 50312-4303
--------------------	-------------	------------------------

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

Name of Employer Iowa Natural Heritage	Occupation Executive
---	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2850.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : A6CBCFED91A9A4F25BA7

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Nicholas Ryan

Mailing Address 2209 North Shore Dr

City Clear Lake	State IA	Zip Code 50428-1065
--------------------	-------------	------------------------

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

Name of Employer Concordia Group	Occupation President
-------------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify) Convention2014

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2014

Transaction ID : A7A33562F962C4443B30

Amount of Each Receipt this Period
2600.00

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

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

5700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 50
	<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)
Young for Iowa, Inc.

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

Mailing Address 743 53rd St

City Des Moines State IA Zip Code 50312-1820

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

Name of Employer Self Occupation Consulting

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : AF1509C2637A042CC890

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Matthew K. McLaughlin

Mailing Address 4244 Foster Dr

City Des Moines State IA Zip Code 50312-2542

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

Name of Employer BDF Investments Occupation Stock Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2014

Transaction ID : AA40D4D09B49B4A38B7F

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Doyce A Boesch

Mailing Address 4515 W St NW

City Washington State DC Zip Code 20007-1513

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

Name of Employer SGI Group Occupation Consulting

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : AB325C885F096450EB75

Amount of Each Receipt this Period
 250.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 50
	<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)
Young for Iowa, Inc.

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

Mailing Address 420 Golden Oaks Dr

City Council Bluffs State IA Zip Code 51503-8620

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

Name of Employer n/a Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2014

Transaction ID : A251AE5EBEB2546F4ABE

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Leon R Shearer

Mailing Address 31634 Silverado Ln

City Waukee State IA Zip Code 50263-7081

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

Name of Employer Self Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify) Convention2014

Election Cycle-to-Date
7600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 12 / 2014

Transaction ID : AB8835A7D77904A5D97C

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Theresa Pattara

Mailing Address PO Box 26506

City Kansas City State MO Zip Code 64196-6506

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

Name of Employer H&R Block Occupation Director

Receipt For: 2014
 Primary General
 Other (specify) Convention2014

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 15 / 2014

Transaction ID : AFE73C628962A43A3A42

Amount of Each Receipt this Period
500.00

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

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

4000.00

**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 17 OF 50
	<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)
Young for Iowa, Inc.

A. Full Name (Last, First, Middle Initial)
Carrol Dean Bolen

Mailing Address 34986 Charbono Pt

City Waukee	State IA	Zip Code 50263-7063
----------------	-------------	------------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2014

Transaction ID : A337E6C2DD39B4B87AF3

Amount of Each Receipt this Period
250.00

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

Mailing Address 3314 John Lynde Rd

City Des Moines	State IA	Zip Code 50312-3068
--------------------	-------------	------------------------

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

Name of Employer Redwave Communications	Occupation Marketing Executive
--	-----------------------------------

Receipt For: 2014
 Primary General
 Other (specify) Convention2014

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2014

Transaction ID : A842C6F6C82DD4D80A03

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Janice Daly

Mailing Address 620 Cedar St

City De Soto	State IA	Zip Code 50069-1066
-----------------	-------------	------------------------

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

Name of Employer n/a	Occupation Retired
-------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2014

Transaction ID : AE082059FBD1A49BC9C8

Amount of Each Receipt this Period
100.00

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 50
	<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)
Young for Iowa, Inc.

A. Full Name (Last, First, Middle Initial)
James Brickman

Mailing Address 401 Queensway Dr

City Lexington State KY Zip Code 40502-1008

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

Name of Employer iHigh.com Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify) Convention2014

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2014

Transaction ID : A737D63A3F73A42BDABB

Amount of Each Receipt this Period
 250.00

Amount of Each Receipt this Period
 1250.00

B. Full Name (Last, First, Middle Initial)
Jay Anderson

Mailing Address 5615 Flagstone Way

City West Des Moines State IA Zip Code 50266-3859

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

Name of Employer Roth & Company Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 25 / 2014

Transaction ID : A9525C5A11E914AC4ABB

Amount of Each Receipt this Period
 500.00

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
Lawrence Disney

Mailing Address 215 Beech Blvd

City Pleasant Hill State IA Zip Code 50327-9005

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

Name of Employer Midwest Watchdog Occupation Radio Host

Receipt For: 2014
 Primary General
 Other (specify) Convention2014

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2014

Transaction ID : A51640FB3423940DD8C2

Amount of Each Receipt this Period
 250.00

Amount of Each Receipt this Period
 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 50
	<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)
Young for Iowa, Inc.

A. Full Name (Last, First, Middle Initial)
Brook Simmons

Mailing Address 2441 Crums Church Rd

City Berryville State VA Zip Code 22611-2019

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

Name of Employer territory & Commonwealth Occupation President

Receipt For: 2014
 Primary General
 Other (specify) Convention2014

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 05 / 2014

Transaction ID : A2EFDE1FB314E4A07A36

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Edgar D McClellan

Mailing Address 4805 29th St S

City Arlington State VA Zip Code 22206-1309

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

Name of Employer PwC Occupation Attorney/Accountant

Receipt For: 2014
 Primary General
 Other (specify) Convention2014

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 12 / 2014

Transaction ID : AE9A33B82128D44BA917

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Philip Dorweiler JR

Mailing Address 786 S Foxtail Cir

City West Des Moines State IA Zip Code 50266-7639

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

Name of Employer Self Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : AE7C924BC5B364D1799A

Amount of Each Receipt this Period
 100.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 50
	<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)
Young for Iowa, Inc.

Full Name (Last, First, Middle Initial) A. Brian Klippenstein		Date of Receipt MM / DD / YYYY 06 / 17 / 2014
Mailing Address 15945 HH		Transaction ID : A5F8B4E8B2E204E42AED
City Platte City	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Consultant	
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Todd Brinkmeyer		Date of Receipt MM / DD / YYYY 06 / 30 / 2014
Mailing Address PO Box 788		Transaction ID : A6EE4378D0CE349D1A0D
City Post Falls	State ID	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Plummer Forest	Occupation Manager	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) C. Darren W. Young		Date of Receipt MM / DD / YYYY 06 / 21 / 2014
Mailing Address 10947 Alison Way		Transaction ID : A7D64A19220FD4EEDB88
City Inver Grove Height	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer RBC Wealth Management	Occupation Product Manager	
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	Election Cycle-to-Date 7800.00	

SUBTOTAL of Receipts This Page (optional).....	5450.00
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 21 OF 50
	<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)
Young for Iowa, Inc.

A. Full Name (Last, First, Middle Initial)
Norman Brownstein

Mailing Address 410 17th St #2200

City	State	Zip Code
Denver	CO	80202-4432

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

Name of Employer	Occupation
Brownstein Hyatt Farber Schreck	Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : A1E7EB394DD054554AF6

Amount of Each Receipt this Period
 _____ 1000.00

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

Mailing Address 5759 Coachlight Ct

City	State	Zip Code
West Des Moines	IA	50266-2837

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

Name of Employer	Occupation
Wealth Enhancement	Seniro Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 22 / 2014

Transaction ID : A5D35F3FEAF0E43B2A7C

Amount of Each Receipt this Period
 _____ 1000.00

C. Full Name (Last, First, Middle Initial)
James Carstensen

Mailing Address 3648 Park PI NW

City	State	Zip Code
Washington	DC	20010-1633

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

Name of Employer	Occupation
US Congress	Legislative Aide

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 29 / 2014

Transaction ID : AAAF0892BEEC9473B90B

Amount of Each Receipt this Period
 _____ 250.00

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

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

_____ 2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 50
	<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)
Young for Iowa, Inc.

A. Full Name (Last, First, Middle Initial)
Anupama V. Young

Mailing Address 10947 Alison Way

City Inver Grove Height State MN Zip Code 55077-5462

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

Name of Employer Self Occupation Accountant

Receipt For: 2014
 Primary General
 Other (specify) Convention2014

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2014

Transaction ID : A814E53AF09804E64BD3

Amount of Each Receipt this Period
 2600.00

7800.00

B. Full Name (Last, First, Middle Initial)
Amanda Rose De Jong

Mailing Address 2725 47th St

City Des Moines State IA Zip Code 50310-3133

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

Name of Employer Iowa Corn Growers Occupation Policy Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2014

Transaction ID : ADD3F1F1FF20F4C9AB01

Amount of Each Receipt this Period
 200.00

650.00

C. Full Name (Last, First, Middle Initial)
JOHN ONEILL

Mailing Address 1749 Seaton St NW

City Washington State DC Zip Code 20009-2625

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

Name of Employer CAPITOL COUNSEL Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : AF3BFE7EDFF9747CCB85

Amount of Each Receipt this Period
 2600.00

5200.00

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

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

5400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 50
	<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)
Young for Iowa, Inc.

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

Mailing Address 5396 Courtyard Dr

City State Zip Code
Gonzales LA 70737-8560

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

Name of Employer Occupation
Guidry Associates Policy Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2014

Transaction ID : A3A7A5ADB48034448949

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
John Ruan III

Mailing Address 465 Foster Dr

City State Zip Code
Des Moines IA 50312-2513

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

Name of Employer Occupation
Ruan Transportation Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 28 / 2014

Transaction ID : ACAD6E6A738F94C188F4

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Cameron Craig Sutton

Mailing Address 10505 NW 75th Pl

City State Zip Code
Grimes IA 50111-1064

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

Name of Employer Occupation
n/a Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : A5B17977B1C784538AB4

Amount of Each Receipt this Period
2600.00

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

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

6200.00

64775.00

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

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

FOR LINE NUMBER: PAGE 24 OF 50
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Young for Iowa, Inc.

A. Full Name (Last, First, Middle Initial)
lowans for Latham

Mailing Address 675 N Washington St Ste 140

City State Zip Code
Alexandria VA 22314-1934

FEC ID number of contributing federal political committee. **C C00287045**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Convention2014

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2014

Transaction ID : AFD95869D7EF9461C81D

Amount of Each Receipt this Period
 2000.00

6000.00

B. Full Name (Last, First, Middle Initial)
For Americas Republican Majority PAC

Mailing Address 675 N Washington St Ste 410

City State Zip Code
Alexandria VA 22314-1939

FEC ID number of contributing federal political committee. **C C00409672**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2014

Transaction ID : AE837F8CB24D74F68A43

Amount of Each Receipt this Period
 5000.00

10000.00

C. Full Name (Last, First, Middle Initial)
lowans for Latham

Mailing Address 675 N Washington St Ste 140

City State Zip Code
Alexandria VA 22314-1934

FEC ID number of contributing federal political committee. **C C00287045**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2014

Transaction ID : A8C864CF6997B4C41887

Amount of Each Receipt this Period
 2000.00

4000.00

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

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

9000.00

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

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

FOR LINE NUMBER: PAGE 25 OF 50

(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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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)
Young for Iowa, Inc.

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

Mailing Address **PO Box 192**

City: **Des Moines** State: **IA** Zip Code: **50301-0192**

FEC ID number of contributing federal political committee: **C C00379479**

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify) **Convention2014**

Election Cycle-to-Date: **15000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
06 / 30 / 2014

Transaction ID : AD909FC1E2CCF4460823

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
The Hawkeye PAC

Mailing Address **PO Box 192**

City: **Des Moines** State: **IA** Zip Code: **50301-0192**

FEC ID number of contributing federal political committee: **C C00379479**

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **15000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
06 / 30 / 2014

Transaction ID : AC25213C891074ABC967

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Friends of John Boehner

Mailing Address **7908 Cincinnati Dayton Road, Ste I**

City: **West Chester** State: **OH** Zip Code: **45069-6629**

FEC ID number of contributing federal political committee: **C C00237198**

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
06 / 30 / 2014

Transaction ID : A23AC3DFFC5DE402FBAD

Amount of Each Receipt this Period
2000.00

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

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

12000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 50
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Young for Iowa, Inc.

A. The Hawkeye PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 192

City State Zip Code
Des Moines IA 50301-0192

FEC ID number of contributing federal political committee. **C C00379479**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2014

Transaction ID : ADF36DFD015D24FCC8ED

Amount of Each Receipt this Period
 5000.00

B. Iowans for Latham

Full Name (Last, First, Middle Initial)
Mailing Address 675 N Washington St Ste 140

City State Zip Code
Alexandria VA 22314-1934

FEC ID number of contributing federal political committee. **C C00287045**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2014

Transaction ID : A097474AFEEFB44A5B59

Amount of Each Receipt this Period
 2000.00

C. Next Century Fund

Full Name (Last, First, Middle Initial)
Mailing Address 116 S Royal St

City State Zip Code
Alexandria VA 22314-3328

FEC ID number of contributing federal political committee. **C C00343947**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : A2FBB016B3CE641B9A2C

Amount of Each Receipt this Period
 5000.00

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

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

12000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 50
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Young for Iowa, Inc.

A. The Freedom Project
 Full Name (Last, First, Middle Initial)
 Mailing Address 320 First Street SE
 City Washington State DC Zip Code 20003-1838
 FEC ID number of contributing federal political committee. **C C00305805**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A5CD7EE972B714D76A93
 Amount of Each Receipt this Period
 5000.00

B. For Americas Republican Majority PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 675 N Washington St Ste 410
 City Alexandria State VA Zip Code 22314-1939
 FEC ID number of contributing federal political committee. **C C00409672**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify) Convention2014
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 21 / 2014
Transaction ID : A7BB705173F9D41018A0
 Amount of Each Receipt this Period
 5000.00

C. Kelly PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 901 N Washington St Suite 700
 City Alexandria State VA Zip Code 22314-1535
 FEC ID number of contributing federal political committee. **C C00493411**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : AC9508F146787426591A
 Amount of Each Receipt this Period
 2500.00

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

12500.00
 45500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 50
	<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)
Young for Iowa, Inc.

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

Mailing Address **PO Box 123**

City **Van Meter** State **IA** Zip Code **50261-0123**

FEC ID number of contributing federal political committee. **C H4IA03115**

Name of Employer Candidate _____ Occupation Candidate _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date **275408.18**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : A942FF20A60CA4D3281C

Amount of Each Receipt this Period
 _____ **6329.72**

In-kind:travel

B. Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 _____ / _____ / _____

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 _____ / _____ / _____

Amount of Each Receipt this Period

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

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

_____ **6329.72**

_____ **6329.72**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 50
	<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	

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)
Young for Iowa, Inc.

A. Full Name (Last, First, Middle Initial)
Campaign HQ

Mailing Address **PO Box 257**

City **Brooklyn** State **IA** Zip Code **52211-0257**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **2496.60**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 12 / 2014

Transaction ID : A52CD565C9EB8415D834

Amount of Each Receipt this Period
2496.60

overpayment returned

B. Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2496.60

2496.60

**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 30 OF 50	
	<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)
Young for Iowa, Inc.

Full Name (Last, First, Middle Initial) A. Gina Noll		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address PO Box 192		Amount of Each Disbursement this Period 2500.00 Transaction ID : B2BD541D1EDFD41FE9D5
City Des Moines	State IA	
Zip Code 50301-0192	Purpose of Disbursement In-kind:administrative services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Convention2014		

Full Name (Last, First, Middle Initial) B. Stephanie Crowley		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 1400 S 52nd St #19		Amount of Each Disbursement this Period 2500.00 Transaction ID : B289443EDD87B4A169DC
City West Des Moines	State IA	
Zip Code 50265-5260	Purpose of Disbursement In-kind:database management	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Convention2014		

Full Name (Last, First, Middle Initial) c. David Young		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address PO Box 123		Amount of Each Disbursement this Period 6329.72 Transaction ID : B942FF20A60CA4D3281C
City Van Meter	State IA	
Zip Code 50261-0123	Purpose of Disbursement In-kind:travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	State: District:
<input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	11329.72
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 31 OF 50			
	<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)
Young for Iowa, Inc.

Full Name (Last, First, Middle Initial) A. Stephen Pyle & Associates		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 3716 Ingersoll Ste D		Amount of Each Disbursement this Period 250.00 Transaction ID : B460E468F228246578D6
City Des Moines	State IA Zip Code 50312-3440	
Purpose of Disbursement office rent	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

Full Name (Last, First, Middle Initial) B. Courtney Joann Ghee		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 701 SE 3rd St		Amount of Each Disbursement this Period 206.10 Transaction ID : BC1F9563D4D994BEFAB8
City Ankeny	State IA Zip Code 50021-3303	
Purpose of Disbursement mileage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. American Express		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 200 Vesey St		Amount of Each Disbursement this Period 1406.06 Transaction ID : B9333F020320846EAAF4
City New York	State NY Zip Code 10080	
Purpose of Disbursement CREDIT CARD: See Below	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1862.16
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 32 OF 50	
	<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)
Young for Iowa, Inc.

Full Name (Last, First, Middle Initial) A. MacDonald Letter Service		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 1632 Ohio St		Amount of Each Disbursement this Period 14244.49 Transaction ID : B7511235AD6054E99BAC
City Des Moines	State IA	
Zip Code 50314-3633	Purpose of Disbursement printing and mailing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Strategic Perception Inc		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 6158 Mulholland Hwy		Amount of Each Disbursement this Period 3500.00 Transaction ID : B420BBAF5B2264F8899F
City Los Angeles	State CA	
Zip Code 90068-1644	Purpose of Disbursement strategy consultation	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	State: District:	

Full Name (Last, First, Middle Initial) c. Bellwether Consulting Group		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 1775 I Street NW # 700		Amount of Each Disbursement this Period 2000.00 Transaction ID : B589E1C94711B4C5B967
City Washington	State DC	
Zip Code 20006-2416	Purpose of Disbursement fundraising fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	19744.49
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 50			
	<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)
Young for Iowa, Inc.

Full Name (Last, First, Middle Initial) A. Charles Johnson		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 121 Fox Haven Dr		Amount of Each Disbursement this Period 1500.00 Transaction ID : BC51852D70DF5456F909
City Council Bluffs	State IA Zip Code 51503-1047	
Purpose of Disbursement organizational consulting	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

Full Name (Last, First, Middle Initial) B. Matthew Michael Horihan		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 2416 Olive St Apt 1 APT 818		Amount of Each Disbursement this Period 1500.00 Transaction ID : B87D017E8970641E9B3C
City Cedar Falls	State IA Zip Code 50613-3774	
Purpose of Disbursement Strategy consulting	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

Full Name (Last, First, Middle Initial) c. Adrienne Pyle		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 5000 Waterbury Rd		Amount of Each Disbursement this Period 186.79 Transaction ID : B30F884795EDD42DEA9E
City Des Moines	State IA Zip Code 50312-1918	
Purpose of Disbursement mileage	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3186.79
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 34 OF 50			
	<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)
Young for Iowa, Inc.

Full Name (Last, First, Middle Initial) A. Matthew Michael Horihan		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 2416 Olive St Apt 1 APT 818		Amount of Each Disbursement this Period 1500.00 Transaction ID : BADC72AEF34304A2DBD7
City Cedar Falls	State IA Zip Code 50613-3774	
Purpose of Disbursement strategy consulting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

Full Name (Last, First, Middle Initial) B. Alec Scott Kennedy		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 1115 Payton Ave		Amount of Each Disbursement this Period 485.93 Transaction ID : B9FD5E8C98490406DB02
City Des Moines	State IA Zip Code 50315-5048	
Purpose of Disbursement salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

Full Name (Last, First, Middle Initial) c. MacDonald Letter Service		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2014
Mailing Address 1632 Ohio St		Amount of Each Disbursement this Period 27876.58 Transaction ID : B7F5F90E4B661407FA47
City Des Moines	State IA Zip Code 50314-3633	
Purpose of Disbursement printing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	29862.51
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 35 OF 50			
	<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)
Young for Iowa, Inc.

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 15.00 Transaction ID : B5CA25724AC494CBD9A3
City Lehigh Valley	State PA	
Zip Code 18002-5505	Purpose of Disbursement phone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	State: District:	

Full Name (Last, First, Middle Initial) B. Schultz for Iowa		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address PO Box 3522		Amount of Each Disbursement this Period 300.00 Transaction ID : B65C3DDD6684E4822B5A
City Urbandale	State IA	
Zip Code 50323-0522	Purpose of Disbursement equipment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Aristotle Inc.		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1700.50 Transaction ID : B5AD0F8237B1E4AD4BD3
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement processing fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2015.50
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 36 OF 50	
	<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)
Young for Iowa, Inc.

Full Name (Last, First, Middle Initial) A. MacDonald Letter Service		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 1632 Ohio St		Amount of Each Disbursement this Period 13106.28 Transaction ID : B490C7CF08D0C4B98920
City Des Moines	State IA Zip Code 50314-3633	
Purpose of Disbursement Debt Repayment: printing and mailing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Kabel Business Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 1454 30th St #202		Amount of Each Disbursement this Period 5128.96 Transaction ID : BEF496917235847CEB63
City West Des Moines	State IA Zip Code 50266-1312	
Purpose of Disbursement Payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

Full Name (Last, First, Middle Initial) c. Drew C. Pederson		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 1133 E Md		Amount of Each Disbursement this Period 914.07 Transaction ID : B03E53DB23E7E4DB0B20 [MEMO ITEM]
City Silver Spring	State MD Zip Code 20910	
Purpose of Disbursement salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	18235.24
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 37 OF 50			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 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)
Young for Iowa, Inc.

Full Name (Last, First, Middle Initial) A. Erika Smalley		Date of Disbursement MM / DD / YYYY 06 / 05 / 2014
Mailing Address 1400 S 52nd St #19		Amount of Each Disbursement this Period 813.88
City West Des Moines	State IA	
Zip Code 50265-5260	Purpose of Disbursement salary	Transaction ID : BC7B05AF8A29B4B61B8F
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Thomas Michael Kacmarynski II		Date of Disbursement MM / DD / YYYY 06 / 05 / 2014
Mailing Address 200 North Monroe St Apt #3		Amount of Each Disbursement this Period 810.63
City Prairie City	State IA	
Zip Code 50228-7787	Purpose of Disbursement salary	Transaction ID : B0AB1E9A3B70D412385D
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Adrienne Pyle		Date of Disbursement MM / DD / YYYY 06 / 05 / 2014
Mailing Address 5000 Waterbury Rd		Amount of Each Disbursement this Period 1092.93
City Des Moines	State IA	
Zip Code 50312-1918	Purpose of Disbursement salary	Transaction ID : BF89DB060E32445B3B5B
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 50	
	<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)
Young for Iowa, Inc.

Full Name (Last, First, Middle Initial) A. Kabel Business Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 1454 30th St #202		Amount of Each Disbursement this Period 1497.45
City West Des Moines	State IA	
Zip Code 50266-1312	Purpose of Disbursement payroll services and taxes	Transaction ID : B0CDB9FAE999C43BDAEA
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Tarrance Group		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 201 N Union St Ste 410		Amount of Each Disbursement this Period 7134.00
City Alexandria	State VA	
Zip Code 22314-2649	Purpose of Disbursement Debt Repayment: research	Transaction ID : B11BA6B432A834F50906
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Holtzman Vogel Josefiak PLLC		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 1341 G Street, NW, Suite 1100		Amount of Each Disbursement this Period 600.00
City Washington	State DC	
Zip Code 20005-3105	Purpose of Disbursement Debt Repayment: legal services	Transaction ID : BF0C4AE662C5048F1AD9
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7734.00
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 39 OF 50			
	<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)
Young for Iowa, Inc.

Full Name (Last, First, Middle Initial) A. Kabel Business Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 1454 30th St #202		Amount of Each Disbursement this Period 757.04 Transaction ID : B1281212BB26243FAB28
City West Des Moines	State IA	
Purpose of Disbursement payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

Full Name (Last, First, Middle Initial) B. Alec Scott Kennedy		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 1115 Payton Ave		Amount of Each Disbursement this Period 757.04 Transaction ID : B4CFB076B322041C193D [MEMO ITEM]
City Des Moines	State IA	
Purpose of Disbursement salary	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

Full Name (Last, First, Middle Initial) c. Kabel Business Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 1454 30th St #202		Amount of Each Disbursement this Period 2615.31 Transaction ID : B96C2BC8B78F743F0854
City West Des Moines	State IA	
Purpose of Disbursement payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3372.35
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 40 OF 50	
	<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)
Young for Iowa, Inc.

Full Name (Last, First, Middle Initial) A. Kabel Business Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 1454 30th St #202		Amount of Each Disbursement this Period 802.88 Transaction ID : BC41058CB0F904388AD6
City West Des Moines	State IA	
Zip Code 50266-1312	Purpose of Disbursement payroll services and taxes	[MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

Full Name (Last, First, Middle Initial) B. Erika Smalley		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 1400 S 52nd St #19		Amount of Each Disbursement this Period 241.07 Transaction ID : B2AE9BB95746D430C981
City West Des Moines	State IA	
Zip Code 50265-5260	Purpose of Disbursement salary	[MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

Full Name (Last, First, Middle Initial) c. Thomas Michael Kacmarynski II		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 200 North Monroe St Apt #3		Amount of Each Disbursement this Period 388.40 Transaction ID : B37CB2F1C508A45E3833
City Prairie City	State IA	
Zip Code 50228-7787	Purpose of Disbursement salary	[MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 50			
	<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)
Young for Iowa, Inc.

Full Name (Last, First, Middle Initial) A. Drew C. Pederson		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 1133 E Md		Amount of Each Disbursement this Period 914.08
City Silver Spring	State MD	
Zip Code 20910	Purpose of Disbursement salary	Transaction ID : BEE1A399DBF3A4E9493F
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Adrienne Pyle		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 5000 Waterbury Rd		Amount of Each Disbursement this Period 268.88
City Des Moines	State IA	
Zip Code 50312-1918	Purpose of Disbursement salary	Transaction ID : B081CF316533941D1BA1
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention2014	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	97342.76

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)
Young for Iowa, Inc.

Transaction ID : C4EA732247CDF4C279FA

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

David Young

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
PO Box 123

City State ZIP Code
Van Meter IA 50261-0123

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
50000.00 0.00 50000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 12 / D 30 / Y 2013 M M / D D / Y None 5.00 % (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)..... 50000.00

TOTALS This Period (last page in this line only).....

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Young for Iowa, Inc.

Transaction ID : CA6B1596F4D3D445D976

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

David Young

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
PO Box 123

City State ZIP Code
Van Meter IA 50261-0123

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
75000.00 0.00 75000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 05 / D 29 / Y 2014 M M / D D / Y None 5.00 % (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)..... ▶ 75000.00

TOTALS This Period (last page in this line only)..... ▶

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Young for Iowa, Inc.

Transaction ID : C7CF1240EA02945E3AB1

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

David Young

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
PO Box 123

City State ZIP Code
Van Meter IA 50261-0123

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	0.00	100000.00

TERMS

Date Incurred: M 04 / D 24 / Y 2014
 Date Due: M / D / Y None
 Interest Rate: 5.00 % (apr)
 Secured: 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).....	▶	100000.00
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Young for Iowa, Inc.

Transaction ID : CBF8172762E53416FBB8

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

David Young

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
PO Box 123

City State ZIP Code
Van Meter IA 50261-0123

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
25000.00 0.00 25000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 05 / D 16 / Y 2014 M M / D D / Y None 5.00 % (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)..... ▶ 25000.00
TOTALS This Period (last page in this line only)..... ▶ 250000.00

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)
Young for Iowa, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor American Express	Nature of Debt (Purpose): travel/printing/postage
Mailing Address 200 Vesey St	
City State Zip Code New York NY 10080	

Outstanding Balance Beginning This Period 2051.62	Transaction ID : DB12877C93CDE47119BC	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2051.62

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MacDonald Letter Service	Nature of Debt (Purpose): printing/mailling
Mailing Address 1632 Ohio St	
City State Zip Code Des Moines IA 50314-3633	

Outstanding Balance Beginning This Period 13106.28	Transaction ID : D655DE11DEAD746AC89F	
Amount Incurred This Period 0.00	Payment This Period 13106.28	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Holtzman Vogel Josefiak PLLC	Nature of Debt (Purpose): legal services
Mailing Address 1341 G Street, NW, Suite 1100	
City State Zip Code Washington DC 20005-3105	

Outstanding Balance Beginning This Period 600.00	Transaction ID : D0C593C129D99437389D	
Amount Incurred This Period 0.00	Payment This Period 600.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)	2051.62
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

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

NAME OF COMMITTEE (In Full)
Young for Iowa, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tarrance Group	Nature of Debt (Purpose): research
Mailing Address 201 N Union St Ste 410	
City State Zip Code Alexandria VA 22314-2649	

Outstanding Balance Beginning This Period 7000.00	Transaction ID : D647AF9E03AEF4809BE3	
Amount Incurred This Period 134.00	Payment This Period 7134.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor American Express	Nature of Debt (Purpose): travel/postage/computer
Mailing Address 200 Vesey St	
City State Zip Code New York NY 10080	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D94EE656FB9904B15833	
Amount Incurred This Period 3705.13	Payment This Period 0.00	Outstanding Balance at Close of This Period 3705.13

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bellwether Consulting Group	Nature of Debt (Purpose): Fundraising Fee
Mailing Address 1775 I Street NW # 700	
City State Zip Code Washington DC 20006-2416	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D7E11A2C525F84A7580F	
Amount Incurred This Period 5000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

1) SUBTOTALS This Period This Page (optional)	8705.13
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

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

NAME OF COMMITTEE (In Full)
Young for Iowa, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic Perception Inc	Nature of Debt (Purpose): Success Fee
Mailing Address 6158 Mulholland Hwy	
City State Zip Code Los Angeles CA 90068-1644	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D4C4F5D82146542E69C5	
Amount Incurred This Period 25000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 25000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capital Knowledge Consulting, LLC	Nature of Debt (Purpose): Nomination Fee
Mailing Address PO Box 192	
City State Zip Code Des Moines IA 50301-0192	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D88AAF4F1BBF9408D8B7	
Amount Incurred This Period 40000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 40000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Katie Maloy	Nature of Debt (Purpose): Fundraising Fee
Mailing Address 508 Borderick Drive NE	
City State Zip Code Cedar Rapids IA 52402-1379	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D51F0FA3C367F4992B43	
Amount Incurred This Period 5000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

1) SUBTOTALS This Period This Page (optional)	70000.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

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

NAME OF COMMITTEE (In Full)
Young for Iowa, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Matthew Michael Horihan	Nature of Debt (Purpose): Primary Bonus
Mailing Address 2416 Olive St Apt 1 APT 818	
City State Zip Code Cedar Falls IA 50613-3774	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DDD2887E759E24570B21	
Amount Incurred This Period 5000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cory J Crowley	Nature of Debt (Purpose): Success Fee
Mailing Address 1400 S 52nd St Unit 19	
City State Zip Code West Des Moines IA 50265-5260	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DC5969CA861E4449785D	
Amount Incurred This Period 25000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 25000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Stephanie Crowley	Nature of Debt (Purpose): Success Fee
Mailing Address 1400 S 52nd St #19	
City State Zip Code West Des Moines IA 50265-5260	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D80654349B06A4247AC5	
Amount Incurred This Period 10000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10000.00

1) SUBTOTALS This Period This Page (optional)	40000.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

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

NAME OF COMMITTEE (In Full)
Young for Iowa, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor American Express		Nature of Debt (Purpose): trave/printing/computer
Mailing Address 200 Vesey St		
City State	Zip Code	
New York	NY 10080	

Outstanding Balance Beginning This Period		Transaction ID : D513729AA89364B9B894	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
2044.80	0.00	2044.80	

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)	▶	2044.80
2) TOTALS This Period (last page this line number only)	▶	122801.55
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	250000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		372801.55