

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Stanley Consultants Inc., PAC

ADDRESS (number and street) **225 Iowa Avenue**
Check if different than previously reported. (ACC) **Muscatine IA 52761**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00415224 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2018 through / / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Harper, William, , ,
Type or Print Name of Treasurer

Signature of Treasurer *Harper, William, , ,* [Electronically Filed] Date / / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Stanley Consultants Inc., PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		<input type="text" value="28732.81"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="28816.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="973.27"/>	<input type="text" value="2056.46"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="29789.27"/>	<input type="text" value="30789.27"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="500.00"/>	<input type="text" value="1500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="29289.27"/>	<input type="text" value="29289.27"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Stanley Consultants Inc., PAC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	690.00	1030.00
(ii) Unitemized	276.00	1012.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	966.00	2042.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	966.00	2042.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	7.27	14.46
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	973.27	2056.46
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	973.27	2056.46

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	1500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	500.00	1500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	500.00	1500.00

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	966.00	2042.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	966.00	2042.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)
Stanley Consultants Inc., PAC

A. Decoteau, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 443 River Oaks Dr
 City Baton Rouge State LA Zip Code 70815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stanley Consultants, Inc. Occupation (for Individual) Water Market Operations Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 04 / 03 / 2018
Transaction ID : SA11AI.8940
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduct

B. Decoteau, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 443 River Oaks Dr
 City Baton Rouge State LA Zip Code 70815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stanley Consultants, Inc. Occupation (for Individual) Water Market Operations Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 17 / 2018
Transaction ID : SA11AI.8941
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduct

C. Decoteau, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 443 River Oaks Dr
 City Baton Rouge State LA Zip Code 70815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stanley Consultants, Inc. Occupation (for Individual) Water Market Operations Leader
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 05 / 01 / 2018
Transaction ID : SA11AI.8942
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduct.

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 12
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stanley Consultants Inc., PAC

A. Decoteau, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 443 River Oaks Dr
 City Baton Rouge State LA Zip Code 70815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stanley Consultants, Inc. Occupation (for Individual) Water Market Operations Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 05 / 15 / 2018
Transaction ID : SA11AI.8943
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduct.

B. Decoteau, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 443 River Oaks Dr
 City Baton Rouge State LA Zip Code 70815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stanley Consultants, Inc. Occupation (for Individual) Water Market Operations Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 29 / 2018
Transaction ID : SA11AI.8944
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduct.

C. Decoteau, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 443 River Oaks Dr
 City Baton Rouge State LA Zip Code 70815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stanley Consultants, Inc. Occupation (for Individual) Water Market Operations Leader
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 06 / 12 / 2018
Transaction ID : SA11AI.8945
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduct.

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stanley Consultants Inc., PAC

A. Decoteau, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 443 River Oaks Dr
 City Baton Rouge State LA Zip Code 70815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stanley Consultants, Inc. Occupation (for Individual) Water Market Operations Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 06 / 26 / 2018
Transaction ID : SA11AI.8946
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduct.

B. Helms, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3429 28th Avenue Court
 City Moline State IL Zip Code 61265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stanley Consultants, Inc. Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 04 / 03 / 2018
Transaction ID : SA11AI.8954
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduct.

C. Helms, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3429 28th Avenue Court
 City Moline State IL Zip Code 61265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stanley Consultants, Inc. Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 04 / 17 / 2018
Transaction ID : SA11AI.8958
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduct.

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 12
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stanley Consultants Inc., PAC

A. Helms, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3429 28th Avenue Court
 City Moline State IL Zip Code 61265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stanley Consultants, Inc. Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 05 / 01 / 2018
Transaction ID : SA11AI.8962
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduct.

B. Helms, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3429 28th Avenue Court
 City Moline State IL Zip Code 61265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stanley Consultants, Inc. Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 15 / 2018
Transaction ID : SA11AI.8966
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduct.

C. Helms, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3429 28th Avenue Court
 City Moline State IL Zip Code 61265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stanley Consultants, Inc. Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 05 / 29 / 2018
Transaction ID : SA11AI.8970
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduct.

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stanley Consultants Inc., PAC

A. Helms, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3429 28th Avenue Court
 City Moline State IL Zip Code 61265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stanley Consultants, Inc. Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 06 / 12 / 2018
Transaction ID : SA11AI.8974
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduct.

B. Helms, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3429 28th Avenue Court
 City Moline State IL Zip Code 61265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stanley Consultants, Inc. Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 26 / 2018
Transaction ID : SA11AI.8978
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduct.

C. Mardambek, Anthony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4639 East Kelly Drive
 City Gilbert State AZ Zip Code 85234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stanley Consultants, Inc. Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 29 / 2018
Transaction ID : SA11AI.8986
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduct.

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 11 OF 12
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Stanley Consultants Inc., PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mardambek, Anthony, , ,

Mailing Address 4639 East Kelly Drive

City Gilbert State AZ Zip Code 85234

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

Name of Employer (for Individual) Stanley Consultants, Inc. Occupation (for Individual) Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 06 / 12 / 2018
Transaction ID : SA11AI.8987

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll Deduct.

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mardambek, Anthony, , ,

Mailing Address 4639 East Kelly Drive

City Gilbert State AZ Zip Code 85234

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

Name of Employer (for Individual) Stanley Consultants, Inc. Occupation (for Individual) Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 06 / 26 / 2018
Transaction ID : SA11AI.8988

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll Deduct.

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	40.00
TOTAL This Period (last page this line number only).....	690.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stanley Consultants Inc., PAC

Full Name (Last, First, Middle Initial) A. Stanley Consultants Inc., PAC		Date of Disbursement MM / DD / YYYY 06 / 12 / 2018
Mailing Address 225 Iowa Avenue		FEC Identification Number C 000415224 Transaction ID : SB23.8997
City Muscatine	State IA	Zip Code 52761
Purpose of Disbursement Guam Campaign/Republican Party		Amount of Each Disbursement this Period 500.00
Candidate Name Stanley Consultants Inc., PAC		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
Purpose of Disbursement		Amount of Each Disbursement this Period
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)	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
Purpose of Disbursement		Amount of Each Disbursement this Period
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	500.00