

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Heartland Values PAC

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		140635.41
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	173040.29									
(c) Total Receipts (from Line 19)	70600.73	610195.23								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	243641.02	750830.64								
7. Total Disbursements (from Line 31)	61410.96	568600.58								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	182230.06	182230.06								
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)	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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Heartland Values PAC

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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)	41000.00	227925.00
(ii) Unitemized	70.00	34058.25
(iii) TOTAL (add Lines 11(a)(i) and (ii)	41070.00	261983.25
(b) Political Party Committees	0.00	5000.00
(c) Other Political Committees (such as PACs)	28150.00	336650.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	69220.00	603633.25
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)	1379.96	1558.04
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.77	3.94
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 Transfer (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))	70600.73	610195.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	70600.73	610195.23

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	61410.96	365600.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	61410.96	365600.58
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	173000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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	2500.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	2500.00
29. Other Disbursements.....	0.00	27500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	61410.96	568600.58
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	61410.96	568600.58

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	69220.00	603633.25
34. Total Contribution Refunds (from Line 28(d))	0.00	2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	69220.00	601133.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	61410.96	365600.58
37. Offsets to Operating Expenditures (from Line 15, page 3)	1379.96	1558.04
38. Net Operating Expenditures (subtract Line 37 from Line 36)	60031.00	364042.54

**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 / 26
	<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)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) Jeffery M Walter	Date of Receipt MM / DD / YYYY 12 / 15 / 2010
	Mailing Address PO Box 7061	Transaction ID: AD59583E295DB456E8C1
	City State Zip Code Alexandria VA 22307-0061	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation The Walter Group Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

B.	Full Name (Last, First, Middle Initial) David Alexander Lamond	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 1 Market Plaza Steuart St Tower Ste 2700	Transaction ID: A78DC61986139448186A
	City State Zip Code San Francisco CA 94105-1313	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Artis Capital Management LLC Business	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) Karen K Steffen	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address 89533 550th Ave	Transaction ID: A7B153DFE62F140E58A0
	City State Zip Code Crofton NE 68730-3210	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Rock Barn Stables Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	11000.00
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 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) Brooke D Schieffer</p> <p>Mailing Address 48036 Indian Ridge Ct</p> <p>City State Zip Code Sioux Falls SD 57108-8249</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Student Occupation Student</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 1 0</p> <p>Transaction ID: A9B216073397340F8A7E</p> <p>Amount of Each Receipt this Period 5000.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Tad Michael Buchanan</p> <p>Mailing Address 535 Summit Ave</p> <p>City State Zip Code Mill Valley CA 94941-1032</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Buchanan Investments Occupation Investor</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 1 0</p> <p>Transaction ID: A09DAD307BD3C48A580B</p> <p>Amount of Each Receipt this Period 5000.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Kevin V Schieffer</p> <p>Mailing Address 48036 Indian Ridge Ct</p> <p>City State Zip Code Sioux Falls SD 57108-8249</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self Occupation Schieffer Consulting</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 1 0</p> <p>Transaction ID: A1F3AB75D3DEF48C2BD6</p> <p>Amount of Each Receipt this Period 5000.00</p>
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SUBTOTAL of Receipts This Page (optional)	15000.00
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 / 26
	<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)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) Nancy C Taylor		Date of Receipt
	Mailing Address 55 Ardilla Rd		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Orinda	CA	94563-2201
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Homemaker		Occupation Homemaker	Transaction ID: A22A7D4A21BEB48C5B95
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="5000.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="5000.00"/>

B.	Full Name (Last, First, Middle Initial) John Michael Buchanan		Date of Receipt
	Mailing Address 395 Dalewood Dr		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Orinda	CA	94563-1215
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Buchanan Investments		Occupation Venture Capital	Transaction ID: A82B705681D164972A5B
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="5000.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="5000.00"/>

C.	Full Name (Last, First, Middle Initial) Frederick J Steffen		Date of Receipt
	Mailing Address 89533 550th Ave		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Crofton	NE	68730-3210
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Rock Barn Stables		Occupation Owner	Transaction ID: A444C7F2F18AD41E192E
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="5000.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="5000.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="15000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="41000.00"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 26
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial)
Together for our Majority PAC

Mailing Address 675 N Washington St Ste 410

City State Zip Code
Arlington VA 22314

FEC ID number of contributing federal political committee. **C** C00364174

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
MM / DD / YYYY
11 / 26 / 2010

Transaction ID: AD59A1E5F9473451E8B7

Amount of Each Receipt this Period
650.00

In-kind: Event Fundraising Services

B. Full Name (Last, First, Middle Initial)
National Multi Housing Council PAC

Mailing Address 1850 M St NW Ste 540

City State Zip Code
Washington DC 20036-5816

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
12 / 07 / 2010

Transaction ID: A62D4AB1BB2AC4DD187E

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Davita Inc PAC

Mailing Address 601 Hawaii St

City State Zip Code
El Segundo CA 90245

FEC ID number of contributing federal political committee. **C** C00340943

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
12 / 07 / 2010

Transaction ID: A6B8734DC94F54DFCA91

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► **8150.00**

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 10 / 26
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial)
Wine and Spirits Wholesalers of America Inc PAC

Mailing Address 805 15th St NW Ste 430

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 07 / 2010
Transaction ID: AAF370C54F5E64359A7B
Amount of Each Receipt this Period: 5000.00

B. Full Name (Last, First, Middle Initial)
Brooke Holdings Inc and Jackson National Life Insurance Company Separate Seg Fund

Mailing Address 1 Corporate Way

City Lansing State MI Zip Code 48951

FEC ID number of contributing federal political committee. **C** C00254953

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 07 / 2010
Transaction ID: A5D2B901FD3644EADB3F
Amount of Each Receipt this Period: 5000.00

C. Full Name (Last, First, Middle Initial)
Electrical Contractors PAC

Mailing Address 3 Bethesda Metro Center Ste 1100

City Bethesda State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C** C00113811

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 15 / 2010
Transaction ID: AA8ED6C1B86C948019C8
Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ► 15000.00

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 / 26
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) Radiation Therapy Services Inc PAC		Date of Receipt
	Mailing Address 2234 Colonial Blvd		<input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Fort Myers	FL	33907
	FEC ID number of contributing federal political committee.		<input type="text" value="C00385120"/>
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: A5A0824AE57154E0EB4E Amount of Each Receipt this Period <input type="text" value="5000.00"/>	
Aggregate Year-to-Date ▼		<input type="text" value="5000.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="28150.00"/>

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

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

FOR LINE NUMBER: PAGE 12 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial)
Great America Leasing
Mailing Address 8742 Innovation Way
City Chicago State IL Zip Code 60682-0087
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 23.16
Date of Receipt 11 / 30 / 2010
Transaction ID: A21C067C9F5924A6C8A2
Amount of Each Receipt this Period 23.16
Voided Check #2890

B. Full Name (Last, First, Middle Initial)
National Republican Senate Committee
Mailing Address 425 2nd St NE
City Washington State DC Zip Code 20002
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1356.80
Date of Receipt 12 / 07 / 2010
Transaction ID: A37ADCEA128634B229C9
Amount of Each Receipt this Period 1356.80
Reimbursement for Car Service

SUBTOTAL of Receipts This Page (optional)	1379.96
TOTAL This Period (last page this line number only)	1379.96

**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)

PAGE 13 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) Together for our Majority PAC</p> <p>Mailing Address 675 N Washington St Ste 410</p> <p>City Arlington State VA Zip Code 22314</p> <p>Purpose of Disbursement In-kind: Event Fundraising Services</p> <p>Candidate Name Together for our Majority PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BD59A1E5F9473451E8B7</p> <p>Date of Disbursement 11 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 650.00</p>
<p>B. Full Name (Last, First, Middle Initial) First National Bank</p> <p>Mailing Address 100 N Phillips Ave</p> <p>City Sioux Falls State SD Zip Code 57104-6715</p> <p>Purpose of Disbursement Bank Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B18F38234D408427C92B</p> <p>Date of Disbursement 11 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 80.94</p>
<p>C. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 650448</p> <p>City Dallas State TX Zip Code 75265-0448</p> <p>Purpose of Disbursement Credit Card Merchant Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BE9A1C8E0CFAD4AE7A1D</p> <p>Date of Disbursement 11 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 3.28</p>

SUBTOTAL of Disbursements This Page (optional) ▶

734.22

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

**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)

PAGE 14 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

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)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) Barb Buell <hr/> Mailing Address PO Box 505 <hr/> City Sioux Falls State SD Zip Code 57101-0505 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BC41513A388F1401FB52 Date of Disbursement 11 / 30 / 2010
	Amount of Each Disbursement this Period 269.35
	Category/Type
	State: District:
B. Full Name (Last, First, Middle Initial) Dane M Bloch <hr/> Mailing Address 5000 S Nevada Ave Apt 114 <hr/> City Sioux Falls State SD Zip Code 57108-2294 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B46D901C47D7D483A995 Date of Disbursement 11 / 30 / 2010
	Amount of Each Disbursement this Period 433.75
	Category/Type
	State: District:
C. Full Name (Last, First, Middle Initial) Angel R Paulson <hr/> Mailing Address 200 N Phillips Ave Ste L101 <hr/> City Sioux Falls State SD Zip Code 57104-6059 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B18AC847D5CAC4759A1B Date of Disbursement 11 / 30 / 2010
	Amount of Each Disbursement this Period 998.20
	Category/Type
	State: District:

SUBTOTAL of Disbursements This Page (optional)	1701.30
TOTAL This Period (last page this line number only)	

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial)
Justin Brasell

Mailing Address 200 N Phillips Ave Ste L101

City Sioux Falls State SD Zip Code 57104-6059

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: B0920C3EAAEED4083B08
Date of Disbursement: 12 / 01 / 2010

Amount of Each Disbursement this Period: 8000.00

Category/Type

B. Full Name (Last, First, Middle Initial)
Commerce Center Partners

Mailing Address 230 S Phillips Ave Ste 202

City Sioux Falls State SD Zip Code 57104

Purpose of Disbursement PAC Office Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: B9758E3B17CF3433F99D
Date of Disbursement: 12 / 02 / 2010

Amount of Each Disbursement this Period: 96.20

Category/Type

C. Full Name (Last, First, Middle Initial)
First National Bank

Mailing Address 100 N Phillips Ave

City Sioux Falls State SD Zip Code 57104-6715

Purpose of Disbursement Credit Card Merchant Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: BA9B47AF3312749FA86F
Date of Disbursement: 12 / 02 / 2010

Amount of Each Disbursement this Period: 45.51

Category/Type

SUBTOTAL of Disbursements This Page (optional) ► 8141.71

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

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) First National Bank <hr/> Mailing Address 100 N Phillips Ave <hr/> City Sioux Falls State SD Zip Code 57104-6715 <hr/> Purpose of Disbursement Bank Service Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BA442E46C9D314EF5AC8 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 12.00
B.	Full Name (Last, First, Middle Initial) Murphy Goldammer & Prendergast Llp <hr/> Mailing Address PO Box 1728 <hr/> City Sioux Falls State SD Zip Code 57101-1728 <hr/> Purpose of Disbursement Legal Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B0A316B9E04C74386B62 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 405.45
C.	Full Name (Last, First, Middle Initial) First National Bank <hr/> Mailing Address 100 N Phillips Ave <hr/> City Sioux Falls State SD Zip Code 57104-6715 <hr/> Purpose of Disbursement Credit Card Merchant Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B21CC629035214717893 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 5.00

SUBTOTAL of Disbursements This Page (optional) ▶

422.45

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

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) The Lukens Company	Transaction ID: B2E4E8665C8C54BB3831
	Mailing Address 2800 S Shirlington Rd Ste 900	Date of Disbursement MM / DD / YYYY 12 / 10 / 2010
	City Arlington State VA Zip Code 22206-3619	Amount of Each Disbursement this Period 8880.50
	Purpose of Disbursement PAC Mailing Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: B148E907C97AC4CE2ACB
	Mailing Address PO Box 660351	Date of Disbursement MM / DD / YYYY 12 / 14 / 2010
	City Ogden State UT Zip Code 84201-0001	Amount of Each Disbursement this Period 1162.86
	Purpose of Disbursement Payroll Taxes Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Angel R Paulson	Transaction ID: BBDFC05D16B9A4F61B1D
	Mailing Address 200 N Phillips Ave Ste L101	Date of Disbursement MM / DD / YYYY 12 / 15 / 2010
	City Sioux Falls State SD Zip Code 57104-6059	Amount of Each Disbursement this Period 1582.00
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	11625.36
TOTAL This Period (last page this line number only)	

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)

PAGE 18 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) Barb Buell</p> <p>Mailing Address PO Box 505</p> <p>City Sioux Falls State SD Zip Code 57101-0505</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BF722A7CAE6EC426BAF4</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="269.36"/></p>
<p>B. Full Name (Last, First, Middle Initial) Sprint</p> <p>Mailing Address Customer Service</p> <p>City Taunton State MA Zip Code 02780</p> <p>Purpose of Disbursement Phone Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BFE1297F00CB8468B92C</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="65.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Angel R Paulson</p> <p>Mailing Address 200 N Phillips Ave Ste L101</p> <p>City Sioux Falls State SD Zip Code 57104-6059</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B62C8E8881ECC430EB5A</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1582.00"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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)

PAGE 19 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) Barb Buell</p> <p>Mailing Address PO Box 505</p> <p>City Sioux Falls State SD Zip Code 57101-0505</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BF43F7A67B7BE4F17AA3</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="269.36"/></p>
<p>B. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 650448</p> <p>City Dallas State TX Zip Code 75265-0448</p> <p>Purpose of Disbursement Credit Card: See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B9E202BAB370F466F993</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="18327.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Pebble Beach Resorts</p> <p>Mailing Address PO Box 1418</p> <p>City Pebble Beach State CA Zip Code 93953</p> <p>Purpose of Disbursement Event Deposit</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B94E9AE9DB930411B854</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="18327.00"/></p> <p>[MEMO ITEM] Event Deposit</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

**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)

PAGE 20 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: BDDDB410A27BF43DB8BF
	Mailing Address PO Box 650448	Date of Disbursement MM / DD / YYYY 11 / 23 / 2010
	City Dallas State TX Zip Code 75265-0448	Amount of Each Disbursement this Period 3522.39
	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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) 4imprint	Transaction ID: B0A78FB9A04BD48329D0
	Mailing Address PO Box 320	Date of Disbursement MM / DD / YYYY 11 / 23 / 2010
	City Oshkosh State WI Zip Code 54901	Amount of Each Disbursement this Period 1027.60
	Purpose of Disbursement Promotional Wear	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]
Promotional Wear

C.	Full Name (Last, First, Middle Initial) Delta Air Lines Inc	Transaction ID: B22EC86F1601246169CC
	Mailing Address 1030 Delta Blvd	Date of Disbursement MM / DD / YYYY 11 / 23 / 2010
	City Atlanta State GA Zip Code 30354-1989	Amount of Each Disbursement this Period 2295.30
	Purpose of Disbursement PAC Airline Travel	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]
PAC Airline Travel

SUBTOTAL of Disbursements This Page (optional)	3522.39
TOTAL This Period (last page this line number only)	

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 650448</p> <p>City Dallas State TX Zip Code 75265-0448</p> <p>Purpose of Disbursement Credit Card: See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B160910B04A7C4DADA74</p> <p>Date of Disbursement 11 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 13809.04</p>
<p>B. Full Name (Last, First, Middle Initial) Naples Bay Resort</p> <p>Mailing Address 1500 5th Ave S</p> <p>City Naples State FL Zip Code 34102</p> <p>Purpose of Disbursement PAC Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BCB048D8AFF194D418C1</p> <p>Date of Disbursement 11 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 348.20</p> <p>[MEMO ITEM] PAC Lodging</p>
<p>C. Full Name (Last, First, Middle Initial) Embassy Suites</p> <p>Mailing Address 5500 N River Rd</p> <p>City Rosemont State IL Zip Code 60018</p> <p>Purpose of Disbursement PAC Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B8FF9AA9043794ED1A74</p> <p>Date of Disbursement 11 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 380.46</p> <p>[MEMO ITEM] PAC Lodging</p>

SUBTOTAL of Disbursements This Page (optional) ▶

13809.04

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

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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) American Airlines</p> <p>Mailing Address PO Box 619242</p> <p>City Dallas State TX Zip Code 75261-9242</p> <p>Purpose of Disbursement PAC Airline Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BB66D084CE3FB4381B56</p> <p>Date of Disbursement 11 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 2843.40</p> <p>[MEMO ITEM] PAC Airline Travel</p>
<p>B. Full Name (Last, First, Middle Initial) iContact</p> <p>Mailing Address 2635 Meriden Pkwy Ste 200</p> <p>City Durham State NC Zip Code 27713-4201</p> <p>Purpose of Disbursement IT Support</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B9322CB4B292744A08F1</p> <p>Date of Disbursement 11 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 19.00</p> <p>[MEMO ITEM] IT Support</p>
<p>C. Full Name (Last, First, Middle Initial) Delta Air Lines Inc</p> <p>Mailing Address 1030 Delta Blvd</p> <p>City Atlanta State GA Zip Code 30354-1989</p> <p>Purpose of Disbursement PAC Airline Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BF5DDF1EA13A24B81ACB</p> <p>Date of Disbursement 11 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 2543.50</p> <p>[MEMO ITEM] PAC Airline Travel</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) Courtyard Indianapolis Downtown</p> <p>Mailing Address 601 W Washington St</p> <p>City Indianapolis State IN Zip Code 46204</p> <p>Purpose of Disbursement PAC Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BFA5299A45E5640D49F9</p> <p>Date of Disbursement 11 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 187.15</p> <p>[MEMO ITEM] PAC Lodging</p>
<p>B. Full Name (Last, First, Middle Initial) Dav-El Services</p> <p>Mailing Address 200 2nd St</p> <p>City Chelsea State MA Zip Code 02150-1802</p> <p>Purpose of Disbursement PAC Transportation Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B40507E30EE584FA3B1B</p> <p>Date of Disbursement 11 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 3384.84</p> <p>[MEMO ITEM] PAC Transportation Service</p>
<p>C. Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address 300 Josephine St</p> <p>City Denver State CO Zip Code 80206-4234</p> <p>Purpose of Disbursement PAC Airline Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B93A6C494CC3B4144901</p> <p>Date of Disbursement 11 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 1717.80</p> <p>[MEMO ITEM] PAC Airline Travel</p>

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

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Heartland Values PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Porter House</p> <p>Mailing Address 10 Columbus Cir</p> <p>City New York State NY Zip Code 10019</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B470D80E164D34C87ABE</p> <p>Date of Disbursement 11 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 318.47</p> <p>[MEMO ITEM] Meals</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Algonquin Marriott</p> <p>Mailing Address 59 W 44th St</p> <p>City New York State NY Zip Code 10036</p> <p>Purpose of Disbursement PAC Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BF437550637914DD7AB3</p> <p>Date of Disbursement 11 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 1905.42</p> <p>[MEMO ITEM] PAC Lodging</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) US Bank Visa</p> <p>Mailing Address PO Box 790408</p> <p>City St Louis State MO Zip Code 63179-0408</p> <p>Purpose of Disbursement Credit Card: See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B56A1328208BA411DBE0</p> <p>Date of Disbursement 12 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 907.90</p>

SUBTOTAL of Disbursements This Page (optional) ▶

907.90

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

**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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) Charlie Palmer Steak Dc</p> <p>Mailing Address 101 Constitution Ave NW</p> <p>City Washington State DC Zip Code 20001-2133</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BB8DC0DA2E0CE4E379E0</p> <p>Date of Disbursement 12 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 249.50</p> <p>[MEMO ITEM] Meals</p>
<p>B. Full Name (Last, First, Middle Initial) Oceanaire</p> <p>Mailing Address 1201 F St NW</p> <p>City Washington State DC Zip Code 20004-1217</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B1B5D6E6F60B4425088C</p> <p>Date of Disbursement 12 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 437.03</p> <p>[MEMO ITEM] Meals</p>
<p>C. Full Name (Last, First, Middle Initial) Hyatt Regency Hotel</p> <p>Mailing Address 400 New Jersey Ave NW</p> <p>City Washington State DC Zip Code 20001-2002</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B919F5564B9C94A73BCF</p> <p>Date of Disbursement 12 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 76.45</p> <p>[MEMO ITEM] Meals</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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)

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<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)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) Ruth Chris Steakhouse			Transaction ID: B1427D94D001E4CD18C7	
	Mailing Address 1801 Connecticut Ave NW			Date of Disbursement MM / DD / YYYY 12 / 22 / 2010	
	City Washington	State DC	Zip Code 20009-5700	Amount of Each Disbursement this Period 140.69	
	Purpose of Disbursement Meals		Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President				
	State:	District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] Meals

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	61377.09