

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

PACEG COMMITTEE

ADDRESS (number and street) 666 GRAND AVENUE BOX 855

Check if different than previously reported. (ACC) DES MOINES IA 50304

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00074633

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 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day **PRE-Election** Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on _____ in the State of _____

- (d) 30-Day **Post -Election** Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 07 01 2010 through 09 30 2010

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 TRACEY BALL

Signature of Treasurer Electronically Filed by TRACEY BALL Date 10 07 2010

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

Office Use Only							
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FEC FORM 3X (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
PACEG COMMITTEE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

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		13516.36
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	23414.30									
(c) Total Receipts (from Line 19)	6235.83	20774.16								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	29650.13	34290.52								
7. Total Disbursements (from Line 31)	3512.56	8152.95								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	26137.57	26137.57								
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
PACEG COMMITTEE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

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)	4377.25	14139.11
(ii) Unitemized	1853.14	6622.45
(iii) TOTAL (add Lines 11(a)(i) and (ii)	6230.39	20761.56
(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)	6230.39	20761.56
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.)	5.44	12.60
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))	6235.83	20774.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	6235.83	20774.16

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.....	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	3500.00
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	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	3012.56	4652.95
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))..	3512.56	8152.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3512.56	8152.95

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	6230.39	20761.56
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6230.39	20761.56
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: PAGE 6 / 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
PACEG COMMITTEE

A. Full Name (Last, First, Middle Initial)
RANDAL E. AMBROZIC

Mailing Address 1237 29TH AVENUE

City State Zip Code
WEST DES MOINES IA 50266

FEC ID number of contributing federal political committee. C

Name of Employer RUAN Occupation CONTROLLER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2010

Transaction ID: SA11AI.8583

Amount of Each Receipt this Period
90.00

B. Full Name (Last, First, Middle Initial)
RALPH W. ARTHUR

Mailing Address 210 S. PRAIRIE VIEW DRIVE #528

City State Zip Code
WEST DES MONES IA 50266

FEC ID number of contributing federal political committee. C

Name of Employer RUAN TRANS. MGMT SYSTEMS Occupation SENIOR V.P. OF SALES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 756.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2010

Transaction ID: SA11AI.8585

Amount of Each Receipt this Period
252.00

C. Full Name (Last, First, Middle Initial)
WAYNE T. ASHLEY, Jr.

Mailing Address 1198 S. KNOLLWOOD DRIVE

City State Zip Code
GRAFTON WI 53024

FEC ID number of contributing federal political committee. C

Name of Employer RUAN TRANSPORT CORPORATION Occupation REGIONAL VICE PRESIDENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 760.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2010

Transaction ID: SA11AI.8586

Amount of Each Receipt this Period
240.00

SUBTOTAL of Receipts This Page (optional) 582.00

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 7 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
PACEG COMMITTEE

A. Full Name (Last, First, Middle Initial)
TRACEY BALL

Mailing Address **3901 73RD STREET**

City **DES MOINES** State **IA** Zip Code **50322**

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

Name of Employer **RUAN TRANSPORT** Occupation **CHIEF FINANCIAL OFFICER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **749.97**

Date of Receipt **09 / 30 / 2010**

Transaction ID: SA11AI.8590

Amount of Each Receipt this Period **249.99**

B. Full Name (Last, First, Middle Initial)
DARYL D. BLASBERG

Mailing Address **5860 180TH STREET WEST**

City **FARMINGTON** State **MN** Zip Code **55024**

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

Name of Employer **RUAN LEASING** Occupation **OPERATIONS MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **307.71**

Date of Receipt **09 / 30 / 2010**

Transaction ID: SA11AI.8597

Amount of Each Receipt this Period **115.38**

C. Full Name (Last, First, Middle Initial)
ANDREW W. BOUNDS

Mailing Address **1135 MOUNT VERNON DRIVE**

City **GRAYSLAKE** State **IL** Zip Code **60030**

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

Name of Employer **RUAN** Occupation **VP - SALES**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **760.00**

Date of Receipt **09 / 30 / 2010**

Transaction ID: SA11AI.8599

Amount of Each Receipt this Period **240.00**

SUBTOTAL of Receipts This Page (optional) ► **605.37**

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 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
PACEG COMMITTEE

A. Full Name (Last, First, Middle Initial)
SUSAN M. FITZSIMMONS

Mailing Address **418 SIXTH AVENUE #905**

City **DES MOINES** State **IA** Zip Code **50309**

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

Name of Employer **RUAN TRANSPORT CORPORATION** Occupation **CORPORATE ATTORNEY**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.05**

Date of Receipt **09 / 30 / 2010**

Transaction ID: SA11AI.8612

Amount of Each Receipt this Period **173.10**

B. Full Name (Last, First, Middle Initial)
J.W. FLIES

Mailing Address **1939 T AVENUE**

City **DALLAS CENTER** State **IA** Zip Code **50063**

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

Name of Employer **RUAN TRANSPORT** Occupation **SENIOR V.P. MIDWEST**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **737.15**

Date of Receipt **09 / 30 / 2010**

Transaction ID: SA11AI.8614

Amount of Each Receipt this Period **230.76**

C. Full Name (Last, First, Middle Initial)
CRAIG A. GESME

Mailing Address **3913 SW 14TH STREET**

City **DES MOINES** State **IA** Zip Code **50315**

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

Name of Employer **RUAN TRANS. MGMT SYSTEMS** Occupation **ADMIN. ACCOUNTANT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt **09 / 30 / 2010**

Transaction ID: SA11AI.8618

Amount of Each Receipt this Period **120.00**

SUBTOTAL of Receipts This Page (optional) ► **523.86**

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 9 / 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PACEG COMMITTEE

A. Full Name (Last, First, Middle Initial)
RONALD C. HANSON

Mailing Address 2009 NE TRILEIN DRIVE

City State Zip Code
ANKENY IA 50021

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RUAN TRANSPORT CORPORATION VP - HUMAN RESOURCES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 20 / 2010
Transaction ID: SA11AI.8622
Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
KENT HAVENS

Mailing Address 7116 MAPLE DRIVE

City State Zip Code
URBANDALE IA 50322

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RUAN TRANSPORT V.P. OF LABOR RELATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 366.13

Date of Receipt 09 / 30 / 2010
Transaction ID: SA11AI.8623
Amount of Each Receipt this Period 115.62

C. Full Name (Last, First, Middle Initial)
ROBERT S. HOGSTAD

Mailing Address 2055 COUNTRYCLUB BLVD

City State Zip Code
CLIVE IA 50325

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RUAN TRANS. MGMT SYSTEMS AREA DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2010
Transaction ID: SA11AI.8626
Amount of Each Receipt this Period 120.00

SUBTOTAL of Receipts This Page (optional) 1235.62

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 / 14
(check only one)

<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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
PACEG COMMITTEE

A.

Full Name (Last, First, Middle Initial)
STEVEN W MCDANIELS

Mailing Address 19011 SE 228TH STREET

City State Zip Code
RENTON WA 98058

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2010

Transaction ID: SA11AI.8632

Amount of Each Receipt this Period

120.00

B.

Full Name (Last, First, Middle Initial)
TARA N MEIER

Mailing Address 311 NE 28TH STREET

City State Zip Code
ANKENY IA 50021

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

Name of Employer Occupation
RUAN TRANSPORT CORPORATION DIRECTOR OF MARKETING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2010

Transaction ID: SA11AI.8634

Amount of Each Receipt this Period

120.00

C.

Full Name (Last, First, Middle Initial)
JAMES R MULVENNA

Mailing Address 12823 TRIMBERLINE DRIVE

City State Zip Code
URBANDALE IA 50323

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

Name of Employer Occupation
RUAN DIRECTOR OF TRAINING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1024.97

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2010

Transaction ID: SA11AI.8636

Amount of Each Receipt this Period

324.99

SUBTOTAL of Receipts This Page (optional)

564.99

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 / 14
(check only one)

<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)
PACEG COMMITTEE

A.

Full Name (Last, First, Middle Initial) GEORGE C. NEELY		Date of Receipt MM / DD / YYYY 09 / 30 / 2010
Mailing Address 4099 LAKELAND HILLS DRIVE		Transaction ID: SA11AI.8637
City DOUGLASVILLE	State GA	Zip Code 30134-2960
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer RUAN LEASING COMPANY	Occupation OPERATIONS MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 317.32	

B.

Full Name (Last, First, Middle Initial) RON ROMIG		Date of Receipt MM / DD / YYYY 09 / 30 / 2010
Mailing Address 5849 S. WINWOOD DRIVE		Transaction ID: SA11AI.8646
City JOHNSTON	State IA	Zip Code 50131
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 249.99
Name of Employer RUAN LEASING COMPANY	Occupation OPERATIONS MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 749.97	

C.

Full Name (Last, First, Middle Initial) WAYNE A. ROSWICK		Date of Receipt MM / DD / YYYY 09 / 30 / 2010
Mailing Address 7012 RIVER SHORE LANE		Transaction ID: SA11AI.8648
City CHAMPLIN	State MN	Zip Code 55316
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.05
Name of Employer RUAN LEASING COMPANY	Occupation SR V.P. BUSINESS DEVELOPMENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.15	

SUBTOTAL of Receipts This Page (optional)	615.42
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 12 / 14	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<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)
PACEG COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOHN RUAN, III		Date of Receipt																					
	Mailing Address 465 FOSTER DRIVE		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	9		3	0		2	0	1	0														
	City State Zip Code DES MOINES IA 50312		Transaction ID: SA11AI.8649																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 249.99																						
Name of Employer RUAN, INCORPORATED		Occupation PRESIDENT																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2749.97																						

SUBTOTAL of Receipts This Page (optional)	▶	249.99
TOTAL This Period (last page this line number only)	▶	4377.25

**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 / 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
PACEG COMMITTEE

A.

Full Name (Last, First, Middle Initial)
BOSWELL FOR CONGRESS

Transaction ID: SB23.8663

Date of Disbursement

Mailing Address PO BOX 823

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	0

City INDIANOLA State IA Zip Code 50125

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IA District: 03

SUBTOTAL of Disbursements This Page (optional) ►

500.00

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

500.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PACEG COMMITTEE

A.	Full Name (Last, First, Middle Initial) FUNK FOR SUPERVISOR	Transaction ID: SB29.8670
	Mailing Address PO BOX 561	Date of Disbursement 09 / 27 / 2010
	City ALTOONA State IA Zip Code 50009	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement CAMPAIGN CONTRIBUTION	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) GOVERNOR BRANSTAD 2010	Transaction ID: SB29.8667
	Mailing Address PO BOX 3747	Date of Disbursement 09 / 24 / 2010
	City URBANDALE State IA Zip Code 50323	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement CAMPAIGN CONTRIBUTION	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) IOWANS FOR TAX RELIEF	Transaction ID: SB29.8671
	Mailing Address 2610 PARK AVENUE	Date of Disbursement 09 / 29 / 2010
	City MUSCATINE State IA Zip Code 52761	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement PAC CONTRIBUTION	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	3000.00