

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street)

Check if different than previously reported. (ACC)

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

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

STATE ▼ DISTRICT

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)  General (12G)  Runoff (12R)

Convention (12C)  Special (12S)

Election on  in the State of

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

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

Election on  in the State of

5. Covering Period  11 / 29 / 2016 through  12 / 31 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Ashley, Lisa, Dawn Young, ,

Type or Print Name of Treasurer \_\_\_\_\_

Signature of Treasurer Ashley, Lisa, Dawn Young, , **[Electronically Filed]** Date  01 / 31 / 2017

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 3 (Revised 05/2016)

Write or Type Committee Name  
Young for Iowa, Inc.

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	21011.00	27891.00
(b) Total Contribution Refunds (from Line 20(d)) .....	1035.00	1035.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	19976.00	26856.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	247464.66	309004.43
(b) Total Offsets to Operating Expenditures (from Line 14).....	6873.11	6873.11
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	240591.55	302131.32
8. Cash on Hand at Close of Reporting Period (from Line 27).....	84084.82	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	250000.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Young for Iowa, Inc.

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	750.00	6450.00
(ii) Unitemized.....	261.00	1441.00
(iii) TOTAL of contributions from individuals ▶	1011.00	7891.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	20000.00	20000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	21011.00	27891.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	1250.00	1250.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	6873.11	6873.11
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	0.00	150.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	29134.11	36164.11

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	247464.66	309004.43
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	35.00	35.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1035.00	1035.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	248499.66	310039.43

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	303450.37
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	29134.11
25. SUBTOTAL (add Line 23 and Line 24).....	332584.48
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	248499.66
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	84084.82

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

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

FOR LINE NUMBER: PAGE 5 OF 33  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.** Full Name (Last, First, Middle Initial)  
Moorhead, Hunter, , ,  
Mailing Address 606 Crestwood Dr  
City Alexandria State VA Zip Code 22302-2533  
FEC ID number of contributing federal political committee. C  
Name of Employer Information Requested Occupation Information Requested  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 29 / 2016  
Transaction ID : A33F0585C99134B27800  
Amount of Each Receipt this Period  
500.00  
 Memo Item  
 Debt Retirement

**B.** Full Name (Last, First, Middle Initial)  
Strachan, Linda, , ,  
Mailing Address 3708 Military Rd NW  
City Washington State DC Zip Code 20015-1740  
FEC ID number of contributing federal political committee. C  
Name of Employer Dupont Occupation Government Affairs  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 06 / 2016  
Transaction ID : A892629369D174DF7A58  
Amount of Each Receipt this Period  
250.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	750.00

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

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

FOR LINE NUMBER: PAGE 6 OF 33  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**FULL HOUSE PAC**  
Mailing Address PO BOX 751271  
City LAS VEGAS State NV Zip Code 89136  
FEC ID number of contributing federal political committee. **C** C00541128  
Name of Employer Occupation  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 23 / 2016  
Transaction ID : A7AB473B5DFFE4D99BE0  
Amount of Each Receipt this Period  
5000.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JEWELERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (JAPAC)**  
Mailing Address 120 BROADWAY, SUITE 2820  
City NEW YORK State NY Zip Code 10271  
FEC ID number of contributing federal political committee. **C** C00333666  
Name of Employer Occupation  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 14 / 2016  
Transaction ID : A612E5C0A16B445A9B3D  
Amount of Each Receipt this Period  
500.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**National Association of Realtors PAC**  
Mailing Address 430 North Michigan Avenue  
City Chicago State IL Zip Code 60611-4011  
FEC ID number of contributing federal political committee. **C** C00030718  
Name of Employer Occupation  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 23 / 2016  
Transaction ID : A9E128256557B46C0B26  
Amount of Each Receipt this Period  
2500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 8000.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 33	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**THE COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE**

Mailing Address **701 PENNSYLVANIA AVENUE, NW  
SUITE 750**

City Washington	State DC	Zip Code 20004-2661
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FEC ID number of contributing federal political committee. **C C00039578**

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 23 / 2016

**Transaction ID : AE5BA83D84D29478FBBF**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF JOE HECK**

Mailing Address **PO BOX 753908**

City LAS VEGAS	State NV	Zip Code 89136
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FEC ID number of contributing federal political committee. **C C00580688**

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 23 / 2016

**Transaction ID : AD8F3CE38C94B42669DF**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GROCERY MANUFACTURERS ASSOCIATION POLITICAL ACTION COMMITTEE ('GMA PAC')**

Mailing Address **1350 EYE STREET  
SUITE 300**

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C C00250068**

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2016

**Transaction ID : AA966F034184F4A8495F**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 5500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____

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

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

FOR LINE NUMBER: PAGE 8 OF 33  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A. WESTERN SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7555 EAST HAMPDEN AVENUE  
 SUITE 600  
 City DENVER State CO Zip Code 80231  
 FEC ID number of contributing federal political committee. C C00446674  
 Name of Employer Occupation  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2016  
**Transaction ID : AFFA2B6E066B547E59F2**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. KUTAK ROCK & HUIE POLITICAL ACTION COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1650 FARNAM STREET  
 City OMAHA State NE Zip Code 68102  
 FEC ID number of contributing federal political committee. C C00160986  
 Name of Employer Occupation  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 23 / 2016  
**Transaction ID : A63AEE215FB2A4D44867**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. Republican Main Street Partnership PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 325 7th St NW STE 610  
 City Washington State DC Zip Code 20004-2822  
 FEC ID number of contributing federal political committee. C C00165159  
 Name of Employer Occupation  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2016  
**Transaction ID : AA44BA7F854B540A3854**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 2014 Primary Debt Retirement

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

3000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 33	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL CHICKEN COUNCIL POLITICAL ACTION COMMITTEE**

Mailing Address 1015 FIFTEENTH STREET NW,

City Washington	State DC	Zip Code 20005-2605
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FEC ID number of contributing federal political committee. **C** C00034272

Name of Employer	Occupation
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Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2016

**Transaction ID : A4A8014DAFB4C4F1FB4C**

Amount of Each Receipt this Period  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ 1000.00

Memo Item  
 2014 Primary Debt Retirement

**B.** Full Name (Last, First, Middle Initial)  
POLITICAL ACTION COMMITTEE/THE BANK OF NEW YORK MELLON CORPORATION-FEDERAL(BNY MELLON-FED)

Mailing Address BNY MELLON CENTER ROOM 3225  
500 GRANT STREET

City PITTSBURGH	State PA	Zip Code 15258
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FEC ID number of contributing federal political committee. **C** C00494534

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2016

**Transaction ID : A38FA344C6926458BB13**

Amount of Each Receipt this Period  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ 2500.00

Memo Item

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C** \_\_\_\_\_

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

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

Amount of Each Receipt this Period  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	_____ , _____ , _____ 3500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	_____ , _____ , _____ 20000.00

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

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

FOR LINE NUMBER: PAGE 10 OF 33  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
DAVID YOUNG VICTORY FUND

Mailing Address PO BOX 225

City VAN METER State IA Zip Code 50261

FEC ID number of contributing federal political committee. C C00581991

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 29 / 2016

Transaction ID : AFA5C0C848C1A43B191A

Amount of Each Receipt this Period  
1250.00

Memo Item  
Transfer of Net JFC Funds

**B.** Full Name (Last, First, Middle Initial)  
Slevin, Tara, , ,

Mailing Address 933 Pierce St.

City Council Bluffs State IA Zip Code 51503-4626

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Jennie Edmundson Hospital Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

Transaction ID : A5D3C35A683D247A9890

Amount of Each Receipt this Period  
50.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Noah, Jane, , ,

Mailing Address 12207 Wellington Ridge Dr

City Clive State IA Zip Code 50325-8106

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 24 / 2016

Transaction ID : A3226457645D044E49A5

Amount of Each Receipt this Period  
200.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 1250.00

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

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

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

FOR LINE NUMBER: PAGE 11 OF 33  
(check only one)

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

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

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF PLUMBING-HEATING-COOLING CONTRACTORS PAC AKA PHCC-PAC

Mailing Address 180 S WASHINGTON, SUITE 100

City FALLS CHURCH	State VA	Zip Code 22046
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FEC ID number of contributing federal political committee. **C** C00157875

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 07 / 2016

Transaction ID : ADDE3858BE42D4CFFA33

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_

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

Amount of Each Receipt this Period  
 \_\_\_\_\_

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_

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

Amount of Each Receipt this Period  
 \_\_\_\_\_

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	_____ 0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	_____ 1250.00

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

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

FOR LINE NUMBER: PAGE 12 OF 33  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
Bed Bath and Beyond

Mailing Address 650 Liberty Ave

City Union State NJ Zip Code 07083-8107

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
344.37

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 07 / 2016

Transaction ID : A2CA06BACF34C47E0982

Amount of Each Receipt this Period  
132.45

Memo Item Refund

**B.** Full Name (Last, First, Middle Initial)  
Customized Newspaper Advertising

Mailing Address 319 E 5th St

City Des Moines State IA Zip Code 50309-1927

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6328.74

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 23 / 2016

Transaction ID : AB58A008C3F3A44949A5

Amount of Each Receipt this Period  
6328.74

Memo Item Refund

**C.** Full Name (Last, First, Middle Initial)  
Bed Bath and Beyond

Mailing Address 650 Liberty Ave

City Union State NJ Zip Code 07083-8107

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
211.92

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 05 / 2016

Transaction ID : A60229C9360AF4F5EAE6

Amount of Each Receipt this Period  
211.92

Memo Item Refund

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6673.11
<b>TOTAL</b> This Period (last page this line number only).....▶	6673.11

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 33			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Szold, Charles, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2016		
Mailing Address 309 E 5th St Apt 502			FEC Identification Number C		
City Des Moines	State IA	Zip Code 50309-1982	Amount of Each Disbursement this Period 4775.29		
Purpose of Disbursement Salary		Category/ Type	Transaction ID : BFD694128BE9B4EF588B		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Steven, Laura, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2016		
Mailing Address 1265 SE University Ave			FEC Identification Number C		
City Waukee	State IA	Zip Code 50263-8717	Amount of Each Disbursement this Period 3792.34		
Purpose of Disbursement Salary		Category/ Type	Transaction ID : B1A747867D0A4442A9C8		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Baker, Eric, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2016		
Mailing Address 260 Forest Ave			FEC Identification Number C		
City Glen Ellyn	State IL	Zip Code 60137-5339	Amount of Each Disbursement this Period 3919.98		
Purpose of Disbursement Salary		Category/ Type	Transaction ID : BF0C9848D231B4CBF8AB		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	12487.61
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Mullany, Benjamin, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2016	
Mailing Address 611 Lakeside Dr			FEC Identification Number C	
City Lincoln	State NE	Zip Code 68528-1792	Amount of Each Disbursement this Period 2016.48	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : B02331956524E4968810	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Britt, Aaron, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2016	
Mailing Address 322 6th Ave SE			FEC Identification Number C	
City Le Mars	State IA	Zip Code 51031-1756	Amount of Each Disbursement this Period 2016.48	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : B158C6EC830E44130B6D	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. ADP</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2016	
Mailing Address One ADP Blvd MS 325			FEC Identification Number C	
City Roseland	State NJ	Zip Code 07068-1728	Amount of Each Disbursement this Period 7643.04	
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : BC66BB0F1BB5E4FB3BA1	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	11676.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 33			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement
Mailing Address One ADP Blvd MS 325		M M / D D / Y Y Y Y 12 / 06 / 2016
City Roseland	State NJ	Zip Code 07068-1728
Purpose of Disbursement Payroll Fees		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 86.54
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) ▼	Transaction ID : B3A662312F4084F96A86
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Amtrak</b>		Date of Disbursement
Mailing Address 4 Concourse Pkwy		M M / D D / Y Y Y Y 12 / 07 / 2016
City Atlanta	State GA	Zip Code 30328-5397
Purpose of Disbursement Travel Expense		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 326.00
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) ▼	Transaction ID : BA3956D09B7EC4763B4B
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Amtrak</b>		Date of Disbursement
Mailing Address 4 Concourse Pkwy		M M / D D / Y Y Y Y 12 / 12 / 2016
City Atlanta	State GA	Zip Code 30328-5397
Purpose of Disbursement Travel Expense		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 117.00
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) ▼	Transaction ID : B20F941900365442E953
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	529.54
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. MacDonald Letter Service</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016	
Mailing Address 1632 Ohio St			FEC Identification Number C	
City Des Moines	State IA	Zip Code 50314-3633	Amount of Each Disbursement this Period 9357.68	
Purpose of Disbursement Printing		Category/ Type	Transaction ID : BC1FEB40B7F974DC492F	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. i360</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016	
Mailing Address PO Box 37046			FEC Identification Number C	
City Baltimore	State MD	Zip Code 21297-3046	Amount of Each Disbursement this Period 4471.09	
Purpose of Disbursement Software		Category/ Type	Transaction ID : B22514906D12D42109ED	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Professional Data Services</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016	
Mailing Address 824 S. Milledge Ave Ste 101			FEC Identification Number C	
City Athens	State GA	Zip Code 30605-1332	Amount of Each Disbursement this Period 1540.53	
Purpose of Disbursement Compliance Consulting		Category/ Type	Transaction ID : B1AF4BAB725454C51A99	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15369.30
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 33			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Mullany, Benjamin, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016		
Mailing Address 611 Lakeside Dr			FEC Identification Number C		
City Lincoln	State NE	Zip Code 68528-1792			
Purpose of Disbursement Mileage			Transaction ID : B056B2C28CD174C4AAED		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Cartensen, James, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016		
Mailing Address 3648 Park Place NW			FEC Identification Number C		
City Washington	State DC	Zip Code 20010-1633			
Purpose of Disbursement Field Consulting			Transaction ID : B4D802DE29A8545CB875		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Bogart Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016		
Mailing Address 1200 Trinity Drive			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314-4724			
Purpose of Disbursement Fundraising Consulting			Transaction ID : BF06C60866FD74BA98E6		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	21393.45
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. McCarthy Hennings Whalen</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016	
Mailing Address 1850 M St NW Ste 235			FEC Identification Number C	
City Washington	State DC	Zip Code 20036-5837	Amount of Each Disbursement this Period 15136.58	
Purpose of Disbursement Media Consulting		Category/ Type	Transaction ID : BE9D769B1ADD24F62B4D	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Southwest</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2016	
Mailing Address 2702 Love Field Dr			FEC Identification Number C	
City Dallas	State TX	Zip Code 75235-1908	Amount of Each Disbursement this Period 454.20	
Purpose of Disbursement Airfare		Category/ Type	Transaction ID : BEDDCEC97A71D4A1490F	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2016	
Mailing Address PO Box 25505			FEC Identification Number C	
City Lehigh Valley	State PA	Zip Code 18002-5505	Amount of Each Disbursement this Period 209.82	
Purpose of Disbursement Telephone		Category/ Type	Transaction ID : B0F199D122F914C37822	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15800.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 33			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Harris Media LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2016		
Mailing Address 2131 Theo Drive			FEC Identification Number C		
City Austin	State TX	Zip Code 78723-5728	Amount of Each Disbursement this Period 150844.04		
Purpose of Disbursement Media Consulting		Category/ Type	Transaction ID : B170F1EB0A1E44B86914		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2016		
Mailing Address PO Box 25505			FEC Identification Number C		
City Lehigh Valley	State PA	Zip Code 18002-5505	Amount of Each Disbursement this Period 216.74		
Purpose of Disbursement Telephone		Category/ Type	Transaction ID : B6DF588F7A08A4778938		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. MailChimp</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2016		
Mailing Address 675 Ponce de Leon Ave NE Ste 5000			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30308-1884	Amount of Each Disbursement this Period 150.00		
Purpose of Disbursement E-Marketing		Category/ Type	Transaction ID : BAA8F7108465F4783A93		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	151210.78
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 33			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2016
Mailing Address One ADP Blvd MS 325		FEC Identification Number C
City Roseland	State NJ	Zip Code 07068-1728
Purpose of Disbursement Payroll Taxes	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1839.31	
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) ▼	Transaction ID : B5929E134338548A3BF0
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Baker, Eric, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2016
Mailing Address 260 Forest Ave		FEC Identification Number C
City Glen Ellyn	State IL	Zip Code 60137-5339
Purpose of Disbursement Salary	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 3919.97	
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) ▼	Transaction ID : B378DE09AD7C14E61A7E
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Steven, Laura, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016
Mailing Address 1265 SE University Ave		FEC Identification Number C
City Waukee	State IA	Zip Code 50263-8717
Purpose of Disbursement See Memo Entries	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1387.15	
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) ▼	Transaction ID : BED36846A59BF458E8DC
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7146.43
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Steven, Laura, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016	
Mailing Address 1265 SE University Ave			FEC Identification Number C	
City Waukee	State IA	Zip Code 50263-8717	Amount of Each Disbursement this Period 212.49	
Purpose of Disbursement Mileage		Category/ Type	Transaction ID : B1744BF5E5B44BA9B84	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Papa Johns</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016	
Mailing Address 2775 86th St			FEC Identification Number C	
City Urbandale	State IA	Zip Code 50322-4336	Amount of Each Disbursement this Period 25.41	
Purpose of Disbursement Meeting Expense		Category/ Type	Transaction ID : B8FE68DAB446C42F8A50	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016	
Mailing Address 4347 Merle Hay Rd			FEC Identification Number C	
City Des Moines	State IA	Zip Code 50310-2301	Amount of Each Disbursement this Period 669.13	
Purpose of Disbursement Office Equipment		Category/ Type	Transaction ID : BA0510BA565384E8FAB3	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016
Mailing Address 1165 2nd Ave		FEC Identification Number C
City Des Moines	State IA	Zip Code 50318-9704
Purpose of Disbursement Postage		Amount of Each Disbursement this Period 345.00
Candidate Name	Category/ Type	Transaction ID : BAB899AADA7FB4512BBC
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 checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Szold, Charles, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016
Mailing Address 309 E 5th St Apt 502		FEC Identification Number C
City Des Moines	State IA	Zip Code 50309-1982
Purpose of Disbursement See Memo Entries		Amount of Each Disbursement this Period 2056.93
Candidate Name	Category/ Type	Transaction ID : B8FD9CB829C9446C8963
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) <b>c. Jody Suttie Embroidery</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016
Mailing Address 123 Foster Dr		FEC Identification Number C
City Des Moines	State IA	Zip Code 50312-2537
Purpose of Disbursement Promotional Items		Amount of Each Disbursement this Period 416.00
Candidate Name	Category/ Type	Transaction ID : B3E908BCA38E241D995D
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 checked="" type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2056.93
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Szold, Charles, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016	
Mailing Address 309 E 5th St Apt 502			FEC Identification Number C	
City Des Moines	State IA	Zip Code 50309-1982	Amount of Each Disbursement this Period 54.00	
Purpose of Disbursement Mileage		Category/ Type	Transaction ID : B0EFA4FE5FE4746C6817	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Papa Johns</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016	
Mailing Address 2775 86th St			FEC Identification Number C	
City Urbandale	State IA	Zip Code 50322-4336	Amount of Each Disbursement this Period 81.70	
Purpose of Disbursement Meeting Expense		Category/ Type	Transaction ID : B7113F3B9C96140B981E	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. USPS</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016	
Mailing Address 1165 2nd Ave			FEC Identification Number C	
City Des Moines	State IA	Zip Code 50318-9704	Amount of Each Disbursement this Period 85.00	
Purpose of Disbursement Postage		Category/ Type	Transaction ID : B49096004FEB1451FBF2	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. L.L. Bean</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016	
Mailing Address 15 Casco Street			FEC Identification Number C	
City Freeport	State ME	Zip Code 04033-0002	Amount of Each Disbursement this Period 734.00	
Purpose of Disbursement Promotional Items		Category/ Type	Transaction ID : B56AD3762B0254F55893	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Gardner, Jennefer, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2016	
Mailing Address 1200 Trinity Dr			FEC Identification Number C	
City Alexandria	State VA	Zip Code 22314-4724	Amount of Each Disbursement this Period 1040.00	
Purpose of Disbursement See Memo Entries		Category/ Type	Transaction ID : BA29773C5FA8D465495B	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Peter Luger Steak House</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2016	
Mailing Address 178 Broadway			FEC Identification Number C	
City Brooklyn	State NY	Zip Code 11211-6131	Amount of Each Disbursement this Period 1040.00	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : BDF49446A22944E23B2D	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1040.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Earlham Savings Bank Cardmember Service</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2016	
Mailing Address PO Box 790408			FEC Identification Number C	
City Saint Louis	State MO	Zip Code 63179-0408	Amount of Each Disbursement this Period 3092.31	
Purpose of Disbursement See Memo Entries		Category/Type	Transaction ID : B445DADF34AD3446CAE8	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2016	
Mailing Address 300 First St SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 3092.31	
Purpose of Disbursement Event Catering		Category/Type	Transaction ID : BB5CA21F232C74CD491B	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) <b>C. Britt, Aaron, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016	
Mailing Address 322 6th Ave SE			FEC Identification Number C	
City Le Mars	State IA	Zip Code 51031-1756	Amount of Each Disbursement this Period 158.34	
Purpose of Disbursement See Memo Entries		Category/Type	Transaction ID : BBEE02B3182444B0BB49	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3250.65
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 33			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Papa Johns</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016
Mailing Address 2775 86th St		FEC Identification Number C
City Urbandale	State IA	Zip Code 50322-4336
Purpose of Disbursement Meeting Expense	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 75.78	
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) ▼	Transaction ID : B5496F6C1B4754980B1D
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Britt, Aaron, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016
Mailing Address 322 6th Ave SE		FEC Identification Number C
City Le Mars	State IA	Zip Code 51031-1756
Purpose of Disbursement Mileage	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 58.50	
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) ▼	Transaction ID : B78461EF07A9F4815896
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Citi Cards</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2016
Mailing Address PO Box 9001016		FEC Identification Number C
City Louisville	State KY	Zip Code 40290-1016
Purpose of Disbursement See Memo Entries	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1042.88	
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) ▼	Transaction ID : BA3510E9739244AAF88D
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1042.88
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Townplace Suites</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2016	
Mailing Address 10400 Fernwood Rd			FEC Identification Number C	
City Bethesda	State MD	Zip Code 20817-1102	Amount of Each Disbursement this Period 1042.88	
Purpose of Disbursement Lodging		Category/ Type	Transaction ID : B2A87492380984918885	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Radon, Kyle, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016	
Mailing Address 400 Bryant Ave			FEC Identification Number C	
City Glen Ellyn	State IL	Zip Code 60137-5234	Amount of Each Disbursement this Period 4050.65	
Purpose of Disbursement See Memo Entries		Category/ Type	Transaction ID : B1DD01176B06544639C6	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016	
Mailing Address 4347 Merle Hay Rd			FEC Identification Number C	
City Des Moines	State IA	Zip Code 50310-2301	Amount of Each Disbursement this Period 68.87	
Purpose of Disbursement Office Supplies		Category/ Type	Transaction ID : B5DA979967ECB41E0B0F	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4050.65
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Papa Johns</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016
Mailing Address 2775 86th St		FEC Identification Number C
City Urbandale	State IA	Zip Code 50322-4336
Purpose of Disbursement Meeting Expense	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 19.92	
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) ▼	Transaction ID : B334D38BFF9214FC4848
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Radon, Kyle, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016
Mailing Address 400 Bryant Ave		FEC Identification Number C
City Glen Ellyn	State IL	Zip Code 60137-5234
Purpose of Disbursement Mileage	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 76.50	
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) ▼	Transaction ID : B944F5700B32D4A15BF5
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Radon, Kyle, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016
Mailing Address 400 Bryant Ave		FEC Identification Number C
City Glen Ellyn	State IL	Zip Code 60137-5234
Purpose of Disbursement Field Consulting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 3500.00	
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) ▼	Transaction ID : BBBA35FAD03EB41958B6
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	247054.82

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 33	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Citizens for EJ</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2016
Mailing Address 5420 Plum Thicket Mews		FEC Identification Number C
City West Des Moines	State IA	Zip Code 50266-6601
Purpose of Disbursement Refund: Refund		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : B8C5E077BC51340A5A8D
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1000.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Young for Iowa, Inc.** Transaction ID : **CBF8172762E53416FBB8**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Young, David, , , <input type="checkbox"/> Memo Item		Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 123		
City Van Meter	State IA	ZIP Code 50261-0123 <input checked="" type="checkbox"/> Personal Funds of the Candidate

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

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 05 / D 16 / Y 2014	M / D / Y None	5.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....▶	25000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) Transaction ID : C7CF1240EA02945E3AB1  
 Young for Iowa, Inc.

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item Young, David, , ,			Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 123			
City Van Meter	State IA	ZIP Code 50261-0123	<input checked="" type="checkbox"/> Personal Funds of the Candidate

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

<b>TERMS</b>	Date Incurred M 04 / D 24 / Y 2014	Date Due M M / D D / Y None	Interest Rate (If none, enter 0) 5.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--------------	---------------------------------------	--------------------------------	--	---

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

1. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>	
2. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>	
3. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>	
4. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>	

<b>SUBTOTALS</b> This Period This Page (optional).....▶	<input type="text" value="100000.00"/>
<b>TOTALS</b> This Period (last page in this line only) .....▶	<input type="text"/>

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Young for Iowa, Inc.** Transaction ID : **C4EA732247CDF4C279FA**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Young, David, , ,		<input type="checkbox"/> Memo Item	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 123			
City Van Meter	State IA	ZIP Code 50261-0123	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 50000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 50000.00
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<b>TERMS</b>	Date Incurred M 12 <sup>M</sup> / D 30 <sup>D</sup> / Y 2013 Y	Date Due M M / D D / Y None Y	Interest Rate (If none, enter 0) 5.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

<b>SUBTOTALS</b> This Period This Page (optional).....▶	50000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	[ ]

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



**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Young for Iowa, Inc.** Transaction ID : **CA6B1596F4D3D445D976**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Young, David, , ,		<input type="checkbox"/> Memo Item	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 123			
City Van Meter	State IA	ZIP Code 50261-0123	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 75000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 75000.00
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<b>TERMS</b>	Date Incurred M 05 / D 29 / Y 2014	Date Due M M / D D / Y None	Interest Rate (If none, enter 0) 5.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

<b>SUBTOTALS</b> This Period This Page (optional).....▶	75000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	250000.00

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