

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Wayne Iverson for Congress

ADDRESS (number and street)

PO Box 420697

Check if different than previously reported. (ACC)

San Diego

CA

92142-0697

2. FEC IDENTIFICATION NUMBER ▼

C C00502070

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CA

52

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

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Janet Lynn Iverson

Signature of Treasurer Janet Lynn Iverson

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Wayne Iverson for Congress

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))	4722.97	35184.52
(b) Total Contribution Refunds (from Line 20(d))	0	500
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	4722.97	34684.52
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	10873.1	86395.66
(b) Total Offsets to Operating Expenditures (from Line 14)	0	2005
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	10873.1	84390.66
8. Cash on Hand at Close of Reporting Period (from Line 27)	25293.88	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	75000	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Wayne Iverson for Congress

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).....	3170	3170
(ii) Unitemized.....	330	20735
(iii) TOTAL of contributions from individuals ▶	3500	23905
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	5000
(d) The Candidate.....	1222.97	6279.52
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	4722.97	35184.52
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	75000
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	75000
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0	2005
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0	0.02
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	4722.97	112189.54

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	10873.1	86395.66
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	500
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	500
21. OTHER DISBURSEMENTS	0	0
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	10873.1	86895.66

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	31444.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	4722.97
25. SUBTOTAL (add Line 23 and Line 24).....	36166.98
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	10873.1
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	25293.88

**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 5 OF 24
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Wayne Iverson for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Jeremy Snavelly

Mailing Address 4849 E 3rd Street

City Tucson State AZ Zip Code 85711-1242

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

Name of Employer self-employed Occupation computer consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **430**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 20 / 2012

Transaction ID : A-I375

Amount of Each Receipt this Period
420
 Inkind: IT Services 5/1-6/4/2012

B. Full Name (Last, First, Middle Initial)
Mr. Robert T Sweeney

Mailing Address PO Box 36

City Rancho Santa Fe State CA Zip Code 92067-0036

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

Name of Employer retired Occupation retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 23 / 2012

Transaction ID : A-C339

Amount of Each Receipt this Period
1000
 check individual

C. Full Name (Last, First, Middle Initial)
Mr. Fred Nasseri

Mailing Address 16781 Bernardo Center Drive Suite 4

City San Diego State CA Zip Code 92128-2583

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

Name of Employer Unicorn Jewelers Occupation businessman/owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 18 / 2012

Transaction ID : A-C341

Amount of Each Receipt this Period
250
 check individual

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

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

1670.00

**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 6 OF 24
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Wayne Iverson for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Carolyn T Sweeney

Mailing Address PO Box 36

City Rancho Santa Fe State CA Zip Code 92067-0036

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

Name of Employer retired Occupation retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 23 / 2012

Transaction ID : A-C340

Amount of Each Receipt this Period
1000
 contribution check

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

Mailing Address 8728 Robinhood Lane

City La Jolla State CA Zip Code 92037-2135

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

Name of Employer self Occupation physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2012

Transaction ID : A-C347

Amount of Each Receipt this Period
500
 contribution

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1500.00

3170.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 24
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Wayne Iverson for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Wayne Iverson

Mailing Address PO Box 420697

City San Diego State CA Zip Code 92142-0697

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer Self Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
81279.52

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2012

Transaction ID : A-I371

Amount of Each Receipt this Period
15.91

Inkind: telephone

B. Full Name (Last, First, Middle Initial)
Dr. Wayne Iverson

Mailing Address PO Box 420697

City San Diego State CA Zip Code 92142-0697

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer Self Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
81279.52

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 30 / 2012

Transaction ID : A-I363

Amount of Each Receipt this Period
8.85

Inkind: office utilities May 2012

C. Full Name (Last, First, Middle Initial)
Dr. Wayne Iverson

Mailing Address PO Box 420697

City San Diego State CA Zip Code 92142-0697

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer Self Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
81279.52

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2012

Transaction ID : A-I388

Amount of Each Receipt this Period
10.11

Inkind: in kind utilities June 2012

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

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

34.87

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 24
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) A. Dr. Wayne Iverson		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 30 / 2012
Mailing Address PO Box 420697		Transaction ID : A-I365
City San Diego State CA Zip Code 92142-0697	Amount of Each Receipt this Period 11.87	
FEC ID number of contributing federal political committee. C H2CA52071		Inkind: telephone
Name of Employer Self Occupation Physician	Election Cycle-to-Date 81279.52	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Dr. Wayne Iverson		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2012
Mailing Address PO Box 420697		Transaction ID : A-I368
City San Diego State CA Zip Code 92142-0697	Amount of Each Receipt this Period 319.98	
FEC ID number of contributing federal political committee. C H2CA52071		Inkind: office rent
Name of Employer Self Occupation Physician	Election Cycle-to-Date 81279.52	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Dr. Wayne Iverson		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2012
Mailing Address PO Box 420697		Transaction ID : A-I369
City San Diego State CA Zip Code 92142-0697	Amount of Each Receipt this Period 15	
FEC ID number of contributing federal political committee. C H2CA52071		Inkind: staff health insurance
Name of Employer Self Occupation Physician	Election Cycle-to-Date 81279.52	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	346.85
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 24
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Wayne Iverson for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Wayne Iverson

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
81279.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2012

Transaction ID : A-I370

Amount of Each Receipt this Period
10.11

Inkind: **utilities**

B. Full Name (Last, First, Middle Initial)
Dr. Wayne Iverson

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
81279.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 30 / 2012

Transaction ID : A-I366

Amount of Each Receipt this Period
238.85

Inkind: **staff salary**

C. Full Name (Last, First, Middle Initial)
Dr. Wayne Iverson

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
81279.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 30 / 2012

Transaction ID : A-I367

Amount of Each Receipt this Period
15

Inkind: **staff health insurance**

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

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

263.96

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 24
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Wayne Iverson for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Wayne Iverson

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
81279.52

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	30	/	2012

Transaction ID : A-I372

Amount of Each Receipt this Period

258.4

Inkind: staff salary

B. Full Name (Last, First, Middle Initial)
Dr. Wayne Iverson

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
81279.52

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	30	/	2012

Transaction ID : A-I364

Amount of Each Receipt this Period

318.89

Inkind: office rent

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
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Amount of Each Receipt this Period

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

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

577.29
1222.97

**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 11 OF 24			
	<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)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Postmaster		M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address Carmel Mtn Postal Store		Amount of Each Disbursement this Period
City San Diego	State CA	Zip Code 92199-9709
Purpose of Disbursement Administrative/Salary/Overhead: POSTAGE		180
Candidate Name		Transaction ID : B-E-373
Office Sought:	Disbursement For: 2012	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	Category/Type 001

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Complete Campaigns		M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address Ruffin Road		Amount of Each Disbursement this Period
City San Diego	State CA	Zip Code 92123
Purpose of Disbursement credit card fee		8
Candidate Name		Transaction ID : B-E-355
Office Sought:	Disbursement For: 2012	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	Category/Type 001

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Dr. Wayne Iverson		M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period
City San Diego	State CA	Zip Code 92142-0697
Purpose of Disbursement Inkind: office utilities May 2012		8.85
Candidate Name		Transaction ID : B-I-363
Office Sought:	Disbursement For: 2012	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	Category/Type

SUBTOTAL of Disbursements This Page (optional).....	196.85
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 24	
	<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)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) A. Dr. Wayne Iverson		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 319.98 Transaction ID : B-I-368
City San Diego	State CA	
Zip Code 92142-0697	Purpose of Disbursement Inkind: office rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Dr. Wayne Iverson		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 11.87 Transaction ID : B-I-365
City San Diego	State CA	
Zip Code 92142-0697	Purpose of Disbursement Inkind: telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Us Bank		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 1951.38 Transaction ID : B-E-358
City Saint Louis	State MO	
Zip Code 63179-0408	Purpose of Disbursement Advertising: direct campaign services	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.

SUBTOTAL of Disbursements This Page (optional).....	2283.23
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 24			
	<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)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) A. Target Marketing		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 22981 Calle Azorin		Amount of Each Disbursement this Period 326.88
City Mission Viejo	State CA Zip Code 92692-1423	
Purpose of Disbursement automated calls	Candidate Name	Transaction ID : B-S-1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] Subitemization of Us Bank(06/25/12)

Full Name (Last, First, Middle Initial) B. Target Marketing		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address 22981 Calle Azorin		Amount of Each Disbursement this Period 577.74
City Mission Viejo	State CA Zip Code 92692-1423	
Purpose of Disbursement automated telephone calls	Candidate Name	Transaction ID : B-S-3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] Subitemization of Us Bank(06/25/12)

Full Name (Last, First, Middle Initial) c. Target Marketing		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 22981 Calle Azorin		Amount of Each Disbursement this Period 578.3
City Mission Viejo	State CA Zip Code 92692-1423	
Purpose of Disbursement automated telephone calls	Candidate Name	Transaction ID : B-S-4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] Subitemization of Us Bank(06/25/12)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 24			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) A. Target Marketing		Date of Disbursement MM / DD / YYYY 06 / 03 / 2012
Mailing Address 22981 Calle Azorin		Amount of Each Disbursement this Period 318.46
City Mission Viejo	State CA	Zip Code 92692-1423
Purpose of Disbursement automated telephone calls	Category/Type	
Candidate Name	Transaction ID : B-S-5	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Subitemization of Us Bank(06/25/12)	

Full Name (Last, First, Middle Initial) B. Dr. Wayne Iverson		Date of Disbursement MM / DD / YYYY 05 / 30 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 15
City San Diego	State CA	Zip Code 92142-0697
Purpose of Disbursement Inkind: staff health insurance	Category/Type	
Candidate Name	Transaction ID : B-I-367	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Us Bank		Date of Disbursement MM / DD / YYYY 05 / 18 / 2012
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 4953.68
City Saint Louis	State MO	Zip Code 63179-0408
Purpose of Disbursement Advertising: direct advertising	Category/Type 004	
Candidate Name	Transaction ID : B-E-344	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.	

SUBTOTAL of Disbursements This Page (optional).....	4968.68
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 24			
	<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)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. Dons Buttons		M M / D D / Y Y Y Y 04 / 13 / 2012	
Mailing Address 3906 W Morrow Drive		Amount of Each Disbursement this Period	
City Glendale State AZ Zip Code 85308-7531		869.34	
Purpose of Disbursement campaign door hangers		Transaction ID : B-S-7	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Subitemization of Us Bank(05/18/12)	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. Dons Buttons		M M / D D / Y Y Y Y 04 / 19 / 2012	
Mailing Address 3906 W Morrow Drive		Amount of Each Disbursement this Period	
City Glendale State AZ Zip Code 85308-7531		1428.52	
Purpose of Disbursement 6x9 postcards		Transaction ID : B-S-8	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Subitemization of Us Bank(05/18/12)	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. Dons Buttons		M M / D D / Y Y Y Y 04 / 26 / 2012	
Mailing Address 3906 W Morrow Drive		Amount of Each Disbursement this Period	
City Glendale State AZ Zip Code 85308-7531		1428.52	
Purpose of Disbursement 6x9 postcards		Transaction ID : B-S-9	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Subitemization of Us Bank(05/18/12)	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:			

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

**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 24			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) A. Target Marketing		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2012
Mailing Address 22981 Calle Azorin		Amount of Each Disbursement this Period 199
City Mission Viejo	State CA	
Zip Code 92692-1423	Purpose of Disbursement direct telephone calls	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) B. Target Marketing		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2012
Mailing Address 22981 Calle Azorin		Amount of Each Disbursement this Period 260.54
City Mission Viejo	State CA	
Zip Code 92692-1423	Purpose of Disbursement direct telephone calls	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) c. Target Marketing		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2012
Mailing Address 22981 Calle Azorin		Amount of Each Disbursement this Period 511.51
City Mission Viejo	State CA	
Zip Code 92692-1423	Purpose of Disbursement direct telephone calls	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 24			
	<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)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) A. Target Marketing		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address 22981 Calle Azorin		Amount of Each Disbursement this Period 226.25
City Mission Viejo	State CA Zip Code 92692-1423	
Purpose of Disbursement direct telephone calls	Candidate Name	Transaction ID : B-S-11
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] Subitemization of Us Bank(05/18/12)

Full Name (Last, First, Middle Initial) B. Dr. Wayne Iverson		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 15.91
City San Diego	State CA Zip Code 92142-0697	
Purpose of Disbursement Inkind: telephone	Candidate Name	Transaction ID : B-I-371
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Aristotle International		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 1680
City Washington	State DC Zip Code 20003-1164	
Purpose of Disbursement campaign software	Candidate Name	Transaction ID : B-E-357
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	1695.91
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 24			
	<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)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) A. Mr. Jeremy Snavelly		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2012
Mailing Address 4849 E 3rd Street		Amount of Each Disbursement this Period 420 Transaction ID : B-I-375
City Tucson	State AZ Zip Code 85711-1242	
Purpose of Disbursement Inkind: IT Services 5/1-6/4/2012		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Dr. Wayne Iverson		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 318.89 Transaction ID : B-I-364
City San Diego	State CA Zip Code 92142-0697	
Purpose of Disbursement Inkind: office rent		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Dr. Wayne Iverson		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 15 Transaction ID : B-I-369
City San Diego	State CA Zip Code 92142-0697	
Purpose of Disbursement Inkind: staff health insurance		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	753.89
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) A. Flagship		Date of Disbursement
Mailing Address c/o I-Payment PO Box 3429		M M / D D / Y Y Y Y 06 / 04 / 2012
City Thousand Oaks	State CA	Zip Code 91359
Purpose of Disbursement credit card processing fees	Amount of Each Disbursement this Period 141.95	
Candidate Name	Transaction ID : B-E-386	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type 001
State: District:		

Full Name (Last, First, Middle Initial) B. Flagship		Date of Disbursement
Mailing Address c/o I-Payment PO Box 3429		M M / D D / Y Y Y Y 05 / 30 / 2012
City Thousand Oaks	State CA	Zip Code 91359
Purpose of Disbursement credit card processing fees	Amount of Each Disbursement this Period 42.95	
Candidate Name	Transaction ID : B-E-385	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type 001
State: District:		

Full Name (Last, First, Middle Initial) c. Steller Designs		Date of Disbursement
Mailing Address 6886 Alderwood Drive		M M / D D / Y Y Y Y 06 / 11 / 2012
City Carlsbad	State CA	Zip Code 92011-3905
Purpose of Disbursement web site maintenance	Amount of Each Disbursement this Period 40	
Candidate Name	Transaction ID : B-E-356	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type 001
State: District:		

SUBTOTAL of Disbursements This Page (optional)	224.90
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 24	
	<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)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) A. Dr. Wayne Iverson		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 238.85 Transaction ID : B-I-366
City San Diego	State CA	
Zip Code 92142-0697	Purpose of Disbursement Inkind: staff salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Dr. Wayne Iverson		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 10.11 Transaction ID : B-I-370
City San Diego	State CA	
Zip Code 92142-0697	Purpose of Disbursement Inkind: utilities	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Dr. Wayne Iverson		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 10.11 Transaction ID : B-I-388
City San Diego	State CA	
Zip Code 92142-0697	Purpose of Disbursement Inkind: in kind utilities June 2012	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	259.07
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 24	
	<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)
Wayne Iverson for Congress

Full Name (Last, First, Middle Initial) A. Dr. Wayne Iverson		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 258.4
City San Diego State CA Zip Code 92142-0697	Purpose of Disbursement Inkind: staff salary	
Candidate Name	Category/Type	Transaction ID : B-I-372
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....	258.40
TOTAL This Period (last page this line number only).....	10640.93

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L1

Wayne Iverson for Congress

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

[PERSONAL FUNDS]

Election: 2012

Dr. Wayne Iverson

Primary

General

Other (specify) ▼

Mailing Address
PO Box 420697

City State ZIP Code
San Diego CA 92142-0697

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000 0 5000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

09

14

2011

None

None

0.00

% (apr)

Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 5000.00

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

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L2

Wayne Iverson for Congress

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

[PERSONAL FUNDS]

Election: 2012

Dr. Wayne Iverson

Primary

General

Other (specify) ▼

Mailing Address

PO Box 420697

City

State

ZIP Code

San Diego

CA

92142-0697

Original Amount of Loan

50000

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

50000

TERMS

Date Incurred

M 12 / D 15 / Y 2011

Date Due

M / D / Y None

Interest Rate

non % (apr)

Secured:

Yes

No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

50000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Wayne Iverson for Congress** Transaction ID : **SC/10-L3**

LOAN SOURCE Full Name (Last, First, Middle Initial) Dr. Wayne Iverson	[PERSONAL FUNDS]	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 420697		

City	State	ZIP Code
San Diego	CA	92142-0697

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000	0	20000

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 21 / Y 2012	M / D / Y None	NONE % (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: []

SUBTOTALS This Period This Page (optional).....	20000.00
TOTALS This Period (last page in this line only).....	75000.00

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