

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO Box 505  
 Check if different than previously reported. (ACC)  
Sioux Falls SD 57101

2. **FEC IDENTIFICATION NUMBER** C00409003  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 04 01 2006 through 06 30 2006

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 Barb J Buell, Deputy Treasurer

Signature of Treasurer Electronically Filed by Barb J Buell, Deputy Treasurer Date 09 19 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Heartland Values PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		458230.66
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	375633.19									
(c) Total Receipts (from Line 19) .....	150087.56	255354.09								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	525720.75	713584.75								
7. Total Disbursements (from Line 31) .....	117565.19	305429.19								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	408155.56	408155.56								
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) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Heartland Values PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	76840.00	99546.00
(i) Itemized (use Schedule A) .....	57524.95	129205.91
(ii) Unitemized .....	134364.95	228751.91
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	13000.00	22000.00
(c) Other Political Committees (such as PACs) .....	147364.95	250751.91
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	68.90	68.90
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	2653.71	4533.28
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	150087.56	255354.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	150087.56	255354.09

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	94065.19	264929.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	94065.19	264929.19
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	23500.00	40500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	117565.19	305429.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	117565.19	305429.19

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	147364.95	250751.91
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	147364.95	250751.91
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	94065.19	264929.19
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	68.90	68.90
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	93996.29	264860.29

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
Dr David L Elson

Mailing Address 513 E Plum Creek Rd

City State Zip Code  
Sioux Falls SD 57105-6950

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

Name of Employer Occupation  
Avera Health Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 316.00

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2006

**Transaction ID:** 60626.C17491

Amount of Each Receipt this Period  
200.00

Receipt

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

Mailing Address PO Box 440

City State Zip Code  
Rapid City SD 57709-0440

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

Name of Employer Occupation  
Pete Lien & Sons Business Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 15 / 2006

**Transaction ID:** 60622.C16556

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address 1510 11th Ave S Apt 1201

City State Zip Code  
Minneapolis MN 55404-1773

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
06 / 15 / 2006

**Transaction ID:** 60622.C16597

Amount of Each Receipt this Period  
100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1300.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
Loren T Benedict

Mailing Address PO Box 347  
440 Hillsview Dr

City State Zip Code  
Spearfish SD 57783-0347

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

Name of Employer Self Occupation truck driver

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 466.00

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2006

Transaction ID: 60622.C16901

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address PO Box 608

City State Zip Code  
Ocean View NJ 08230-0608

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 820.00

Date of Receipt  
MM / DD / YYYY  
06 / 24 / 2006

Transaction ID: 60626.C17091

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 606 N Broadway

City State Zip Code  
Watertown SD 57201-1606

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2006

Transaction ID: 60710.C17873

Amount of Each Receipt this Period  
200.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
Holm O Bursum, III

Mailing Address PO Box 1457

City State Zip Code  
Socorro NM 87801-1457

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

Name of Employer 1st State Bank of Socorro Occupation Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 24 / 2006

Transaction ID: 60626.C17035

Amount of Each Receipt this Period  
250.00

Receipt

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

Mailing Address 430 E 56th St Apt 5B

City State Zip Code  
New York NY 10022-4171

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

Name of Employer Kemark Financial Services Occupation Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2006

Transaction ID: 60430.C16355

Amount of Each Receipt this Period  
500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Dr Kevin J OConnell

Mailing Address 2503 S Lockwood PI

City State Zip Code  
Sioux Falls SD 57105-3354

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

Name of Employer Urology Institute Occupation Urologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 24 / 2006

Transaction ID: 60626.C17071

Amount of Each Receipt this Period  
1000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
Dr Kevin J OConnell

Mailing Address 2503 S Lockwood PI

City State Zip Code  
Sioux Falls SD 57105-3354

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

Name of Employer Occupation  
Urology Institute Urologist

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 24 / 2006

Transaction ID: 60626.C17075

Amount of Each Receipt this Period  
250.00

Receipt

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

Mailing Address 22495 Cabrillo Hwy S

City State Zip Code  
Half Moon Bay CA 94019-2571

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

Name of Employer Occupation  
Globe Wireless Chairman

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 29 / 2006

Transaction ID: 60710.C17725

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address 2833 SW Tallgrass Dr

City State Zip Code  
Topeka KS 66614-6026

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 236.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2006

Transaction ID: 60710.C17798

Amount of Each Receipt this Period  
120.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1370.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
Philip Guthrie

Mailing Address 3401 38th St NW Apt 707

City State Zip Code  
Washington DC 20016-3043

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

Name of Employer Occupation  
Pericles Communications Senior Account Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2006

Transaction ID: 60626.C17443

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address 29820 Darby Rd

City State Zip Code  
Dade City FL 33525-7714

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

Name of Employer Occupation  
Boltin Pest Control Inc President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
MM / DD / YYYY  
06 / 21 / 2006

Transaction ID: 60622.C16824

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address PO Box 786

City State Zip Code  
Welaka FL 32193-0786

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 116.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2006

Transaction ID: 60430.C16400

Amount of Each Receipt this Period  
116.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>316.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
Lucile A Kirkpatrick

Mailing Address PO Box 786

City State Zip Code  
Welaka FL 32193-0786

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
236.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2006

Transaction ID: 60710.C17857

Amount of Each Receipt this Period  
120.00

Receipt

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

Mailing Address 32871 170th St

City State Zip Code  
Seneca SD 57473-8903

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2116.00

Date of Receipt  
MM / DD / YYYY  
06 / 14 / 2006

Transaction ID: 60622.C16542

Amount of Each Receipt this Period  
2000.00

Receipt

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

Mailing Address 1632 Collyer St

City State Zip Code  
Longmont CO 80501-2822

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
258.00

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2006

Transaction ID: 60626.C16927

Amount of Each Receipt this Period  
200.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2320.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
Marilyn R Solari

Mailing Address 64 Elkin St

City State Zip Code  
Sonora CA 95370-5628

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 24 / 2006

Transaction ID: 60626.C17238

Amount of Each Receipt this Period  
200.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Dr Thomas K Oliver

Mailing Address 5153 Pine Tree Dr

City State Zip Code  
Rapid City SD 57702-9269

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 316.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 15 / 2006

Transaction ID: 60622.C16546

Amount of Each Receipt this Period  
200.00

Receipt

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

Mailing Address 2698 W 72nd St

City State Zip Code  
Baldwin MI 49304-8919

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 30 / 2006

Transaction ID: 60710.C17862

Amount of Each Receipt this Period  
500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 900.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
William R Engel

Mailing Address 7059 Coburn Ln

City Johnston State IA Zip Code 50131-1253

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
06 / 15 / 2006

Transaction ID: 60622.C16550

Amount of Each Receipt this Period  
150.00

Receipt

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

Mailing Address 9884 Carmelita Ave

City Beverly Hills State CA Zip Code 90210-3119

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

Name of Employer NSB Associates Occupation Real Estate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
06 / 25 / 2006

Transaction ID: 60626.C17447

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address 60 Sharon Ave

City Piedmont State CA Zip Code 94611-3512

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 616.00

Date of Receipt  
06 / 21 / 2006

Transaction ID: 60622.C16742

Amount of Each Receipt this Period  
500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1650.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
John G Whinery

Mailing Address 3207 Hawthorne Dr

City State Zip Code  
Amarillo TX 79109-3415

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 24 / 2006

Transaction ID: 60626.C17046

Amount of Each Receipt this Period  
300.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Eugene J Hanavan MD

Mailing Address 1088 Delaware Ave Apt 10H

City State Zip Code  
Buffalo NY 14209-1627

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

Name of Employer Retired Occupation MD

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 24 / 2006

Transaction ID: 60626.C17018

Amount of Each Receipt this Period  
105.00

Receipt

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

Mailing Address 3241 Hwy 164

City State Zip Code  
Mc David FL 32568-2200

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 24 / 2006

Transaction ID: 60626.C17137

Amount of Each Receipt this Period  
225.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	630.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 75
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
Hugh F Richardson

Mailing Address 20510 Falcons Landing Cir Apt 1306

City State Zip Code  
Sterling VA 20165-7596

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 30 / 2006

**Transaction ID:** 60710.C17868

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address 1667 The 12th Fairway

City State Zip Code  
Wellington FL 33414-5933

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
75.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 24 / 2006

**Transaction ID:** 60430.C16391

Amount of Each Receipt this Period  
75.00

Receipt

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

Mailing Address 1667 The 12th Fairway

City State Zip Code  
Wellington FL 33414-5933

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
125.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 28 / 2006

**Transaction ID:** 60430.C16416

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1125.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 75
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Marna R Burkhalter</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6	
Mailing Address 1667 The 12th Fairway		Transaction ID: 60430.C16417	
City State Zip Code Wellington FL 33414-5933	Amount of Each Receipt this Period 70.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 195.00		

Full Name (Last, First, Middle Initial) <b>B. Marna R Burkhalter</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 1667 The 12th Fairway		Transaction ID: 60622.C16473	
City State Zip Code Wellington FL 33414-5933	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

Full Name (Last, First, Middle Initial) <b>C. Freeman B Dunn</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 6	
Mailing Address PO Box 7927		Transaction ID: 60626.C17251	
City State Zip Code Houston TX 77270-7927	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Dunn Enterprises	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	445.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 75
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
Robert Sunderland

Mailing Address 953 Pyrite Ave

City Henderson State NV Zip Code 89015-3059

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
06 / 15 / 2006

Transaction ID: 60622.C16577

Amount of Each Receipt this Period  
200.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
N D Horton, JR

Mailing Address PO Box 4468

City Eatonton State GA Zip Code 31024-4468

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

Name of Employer Horton Homes Inc Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
05 / 23 / 2006

Transaction ID: 60622.C16456

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
N D Horton, JR

Mailing Address PO Box 4468

City Eatonton State GA Zip Code 31024-4468

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

Name of Employer Horton Homes Inc Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
06 / 22 / 2006

Transaction ID: 60626.C16979

Amount of Each Receipt this Period  
400.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	700.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Pamela K Sutterfield		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 6
Mailing Address 6613 Otoe Rd		Transaction ID: 60626.C17468
City State Zip Code Alliance NE 69301-5065	Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Gardner Farms Inc	Occupation Administrative Assistant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B.</b> MRS Ruby Ritterbusch		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 6
Mailing Address 121 Riverplace Dr		Transaction ID: 60626.C16960
City State Zip Code Pierre SD 57501-4600	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> William E Livingstone, III		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 6
Mailing Address 8333 Douglas Ave Ste 990		Transaction ID: 60626.C16930
City State Zip Code Dallas TX 75225-5822	Amount of Each Receipt this Period 600.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Self	Occupation attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
Nancy W Haselhorst

Mailing Address 6225 Mineral Point Rd Apt A6

City Madison State WI Zip Code 53705-4564

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 236.00

Date of Receipt  
06 / 24 / 2006

Transaction ID: 60626.C17211

Amount of Each Receipt this Period  
120.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Ray P Oden, JR

Mailing Address 702 Thora Blvd

City Shreveport State LA Zip Code 71106-1824

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
06 / 27 / 2006

Transaction ID: 60710.C17614

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address PO Box 5361

City Sioux Falls State SD Zip Code 57117-5361

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

Name of Employer Sullivans Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
04 / 24 / 2006

Transaction ID: 60430.C16390

Amount of Each Receipt this Period  
1000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2120.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
Vincente T Castillo, JR

Mailing Address PO Box 1644

City State Zip Code  
Nederland TX 77627-1644

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

Name of Employer Self Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
MM / DD / YYYY  
06 / 24 / 2006

Transaction ID: 60626.C17048

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address 1801 N Lancer St

City State Zip Code  
Peru IN 46970-3647

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

Name of Employer Agent Ware Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
04 / 11 / 2006

Transaction ID: 60412.C16293

Amount of Each Receipt this Period  
210.00

Receipt

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

Mailing Address 20 Framingham Ln

City State Zip Code  
Pittsford NY 14534-1048

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
MM / DD / YYYY  
06 / 21 / 2006

Transaction ID: 60622.C16777

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>410.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Patti Allison		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 6
Mailing Address 6910 Larkvale Dr		Transaction ID: 60626.C17005
City Rancho Palos Verde	State CA	Zip Code 90275-2941
Amount of Each Receipt this Period 500.00		Receipt
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> William P Smallwood		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 6
Mailing Address PO Box 9066540		Transaction ID: 60626.C17201
City San Juan	State PR	Zip Code 00906-6540
Amount of Each Receipt this Period 120.00		Receipt
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.00	

Full Name (Last, First, Middle Initial) <b>C.</b> John D Besse		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 6
Mailing Address 7364 Lake Bluff 19.4 Rd		Transaction ID: 60626.C17246
City Gladstone	State MI	Zip Code 49837-2409
Amount of Each Receipt this Period 500.00		Receipt
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Besse Forest Products	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1120.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
Tad Michael Buchanan

Mailing Address 535 Summit Ave

City State Zip Code  
Mill Valley CA 94941-1032

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

Name of Employer Buchanan Investments Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 6

Transaction ID: 60430.C16410

Amount of Each Receipt this Period  
5000.00

Receipt

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

Mailing Address 395 Dalewood Dr

City State Zip Code  
Orinda CA 94563-1215

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

Name of Employer Buchanan Investments Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 6

Transaction ID: 60430.C16414

Amount of Each Receipt this Period  
5000.00

Receipt

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

Mailing Address One Market Plaza  
Steuart Tower, 22nd Flr

City State Zip Code  
San Francisco CA 94105

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

Name of Employer Andor Capital Occupation Investments

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 6

Transaction ID: 60430.C16415

Amount of Each Receipt this Period  
5000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
R J Gilbert

Mailing Address 4600 Goldfield

City State Zip Code  
San Antonio TX 78218-4601

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

Name of Employer Southwestern Motor Transport  
Occupation Chairman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
06 / 30 / 2006

Transaction ID: 60710.C17804

Amount of Each Receipt this Period  
200.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Dr Ben Malabanan, JR

Mailing Address 2042 Route 16 Ste 102

City State Zip Code  
Dededo GU 96929-6516

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

Name of Employer Self  
Occupation dentist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
06 / 27 / 2006

Transaction ID: 60710.C17697

Amount of Each Receipt this Period  
500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Thomas J Healey, JR

Mailing Address 216 Pleasant St

City State Zip Code  
Rockland MA 02370-1229

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

Name of Employer Alletess Inc  
Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
04 / 11 / 2006

Transaction ID: 60412.C16311

Amount of Each Receipt this Period  
200.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 75
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
K Robert Hahn

Mailing Address 55 Misty Acres Rd

City State Zip Code  
Rolling Hills Esta CA 90274-5749

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2006

Transaction ID: 60626.C17517

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address 736 Crescent Rd

City State Zip Code  
Jackson MI 49203-3965

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 22 / 2006

Transaction ID: 60626.C16983

Amount of Each Receipt this Period  
400.00

Receipt

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

Mailing Address HC 59 Box 12

City State Zip Code  
Mission SD 57555-7603

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 308.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 15 / 2006

Transaction ID: 60622.C16622

Amount of Each Receipt this Period  
250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1650.00

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



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
William F Duhamel, JR

Mailing Address 4 Verona PI

City State Zip Code  
Corte Madera CA 94925-1940

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

Name of Employer Occupation  
Farallon Capital Mgmt Investor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: 60622.C16457

Amount of Each Receipt this Period  
4500.00

Receipt

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

Mailing Address 25 Talley Ln

City State Zip Code  
Rossville GA 30741-5401

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 116.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 6

Transaction ID: 60430.C16354

Amount of Each Receipt this Period  
116.00

Receipt

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

Mailing Address 25 Talley Ln

City State Zip Code  
Rossville GA 30741-5401

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 236.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 6

Transaction ID: 60626.C17026

Amount of Each Receipt this Period  
120.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4736.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
Dr James C Dowdy

Mailing Address 149 Waterview Ln

City Murray State KY Zip Code 42071-4974

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 323.00

Date of Receipt  
04 / 11 / 2006

Transaction ID: 60412.C16250

Amount of Each Receipt this Period  
323.00

Receipt

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

Mailing Address 919 S Eliseo Dr

City Greenbrae State CA Zip Code 94904-2142

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
06 / 22 / 2006

Transaction ID: 60622.C16892

Amount of Each Receipt this Period  
300.00

Receipt

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

Mailing Address PO Box 20

City Calverton State VA Zip Code 20138-0020

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

Name of Employer Self Occupation Dairy Farming

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
06 / 24 / 2006

Transaction ID: 60626.C17135

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	723.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
Dorothy M Olson

Mailing Address 801 Davis St Apt 213

City State Zip Code  
Dubuque IA 52001-1316

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 316.00

Date of Receipt  
MM / DD / YYYY  
06 / 15 / 2006

Transaction ID: 60622.C16616

Amount of Each Receipt this Period  
200.00

Receipt

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

Mailing Address 10 Tamarack Dr

City State Zip Code  
Cortlandt Manor NY 10567-6727

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2006

Transaction ID: 60626.C17369

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address 5150 E Copa De Oro Dr

City State Zip Code  
Anaheim CA 92807-3639

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

Name of Employer Occupation  
Self Property Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 356.00

Date of Receipt  
MM / DD / YYYY  
06 / 27 / 2006

Transaction ID: 60710.C17569

Amount of Each Receipt this Period  
240.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **540.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 75
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Robert T Griffith		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2006	
Mailing Address PO Box 69		Transaction ID: 60710.C17713	
City State Zip Code Gary SD 57237-0069	Amount of Each Receipt this Period 120.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Self Occupation dentist	Aggregate Year-to-Date ▼ 236.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> John H Hoskins MD		Date of Receipt M M / D D / Y Y Y Y 06 / 24 / 2006	
Mailing Address 1504 E Edgewood Rd		Transaction ID: 60626.C17066	
City State Zip Code Sioux Falls SD 57103-4533	Amount of Each Receipt this Period 240.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 356.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Rev Ronald W Burkhalter		Date of Receipt M M / D D / Y Y Y Y 06 / 21 / 2006	
Mailing Address PO Box 1582		Transaction ID: 60622.C16810	
City State Zip Code Lake George MN 56458-1582	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 216.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	460.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
William R Thurston

Mailing Address PO Box 2080

City Durango State CO Zip Code 81302-2080

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

Name of Employer Self Occupation Petro Geol/Farmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
04 / 24 / 2006

Transaction ID: 60430.C16388

Amount of Each Receipt this Period  
200.00

Receipt

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

Mailing Address PO Box 2080

City Durango State CO Zip Code 81302-2080

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

Name of Employer Self Occupation Petro Geol/Farmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
06 / 24 / 2006

Transaction ID: 60626.C17126

Amount of Each Receipt this Period  
200.00

Receipt

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

Mailing Address 233 Salem Church Rd

City Sunfish Lake State MN Zip Code 55118-4742

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

Name of Employer Royal Concrete Pipe Occupation President/CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2006

Transaction ID: 60430.C16397

Amount of Each Receipt this Period  
500.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

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

Mailing Address 4 Verona PI

City State Zip Code  
Corte Madera CA 94925-1940

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

Name of Employer Occupation  
Alley-Oop Films LLC Filmmaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 6

Transaction ID: 60430.C16409

Amount of Each Receipt this Period  
5000.00

Receipt

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

Mailing Address 208 Spencer Ave

City State Zip Code  
Sausalito CA 94965-2050

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 6

Transaction ID: 60430.C16411

Amount of Each Receipt this Period  
5000.00

Receipt

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

Mailing Address 372 Marin Ave

City State Zip Code  
Mill Valley CA 94941-4048

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

Name of Employer Occupation  
James Family Foundation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 6

Transaction ID: 60430.C16412

Amount of Each Receipt this Period  
5000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
Carol Jane Buchanan

Mailing Address 395 Dalewood Dr

City Orinda State CA Zip Code 94563-1215

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 6

Transaction ID: 60430.C16413

Amount of Each Receipt this Period  
5000.00

Receipt

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

Mailing Address 38832 251st St

City Plankinton State SD Zip Code 57368-5728

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 6

Transaction ID: 60622.C16443

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address 315 W 3rd St

City Pittsburg State KS Zip Code 66762-4706

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

Name of Employer Watco Companies Inc Occupation Railroad

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 6

Transaction ID: 60622.C16469

Amount of Each Receipt this Period  
5000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **11000.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
Georgia A Meyer

Mailing Address 1892 Dekalb Ave

City State Zip Code  
Ridgewood NY 11385-1119

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2006

Transaction ID: 60622.C16684

Amount of Each Receipt this Period  
300.00

Receipt

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

Mailing Address 3838 Oak Lawn Ave Ste 911

City State Zip Code  
Dallas TX 75219-4510

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2006

Transaction ID: 60622.C16708

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 1313 Mitchell Blvd

City State Zip Code  
Mitchell SD 57301-4258

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2006

Transaction ID: 60622.C16687

Amount of Each Receipt this Period  
500.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

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

Mailing Address 150 Marie Ave E

City State Zip Code  
Saint Paul MN 55118-4002

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

Name of Employer Occupation  
Tape Mark Co Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2006

Transaction ID: 60622.C16688

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 325 E Autumn Ln

City State Zip Code  
Sioux Falls SD 57105-7132

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2006

Transaction ID: 60622.C16697

Amount of Each Receipt this Period  
600.00

Receipt

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

Mailing Address 9501 E Maple St

City State Zip Code  
Brandon SD 57005-1029

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

Name of Employer Occupation  
Self Developer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2006

Transaction ID: 60622.C16913

Amount of Each Receipt this Period  
1000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Carl Rhodes		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 6
Mailing Address 67 Lake Forest Dr		<b>Transaction ID:</b> 60626.C17050
City State Zip Code Saint Louis MO 63117-1358	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Occupation Handi-Craft Co Manufacturer	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Deanie S Reis		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 6
Mailing Address 7 Greenbriar Dr		<b>Transaction ID:</b> 60626.C17302
City State Zip Code Saint Louis MO 63124-1819	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Occupation Homemaker Homemaker	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Robert P Stemler		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 6
Mailing Address 9241 Randall Ave		<b>Transaction ID:</b> 60626.C17409
City State Zip Code La Habra CA 90631-3437	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Occupation Retired Retired	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 75
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Calvin M Oliver		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 6	
Mailing Address 1722 Tanner Bridge Rd		Transaction ID: 60626.C17410	
City State Zip Code Jefferson City MO 65101-2846	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Marion P Burk		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6	
Mailing Address 431 Medford Leas		Transaction ID: 60710.C17807	
City State Zip Code Medford NJ 08055-2210	Amount of Each Receipt this Period -25.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Information Requested Occupation Information Requested	Aggregate Year-to-Date ▼ 0.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Royce Faulkner		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 6	
Mailing Address 1703 Michael St		Transaction ID: 60626.C17521	
City State Zip Code Austin TX 78704-2040	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Faulkner Construction Occupation Building Contractor	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	475.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
Goff Smith

Mailing Address 903 Private Rd

City State Zip Code  
Winnetka IL 60093-1525

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2006

Transaction ID: 60626.C17524

Amount of Each Receipt this Period  
250.00

Receipt

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

Mailing Address PO Box 9163

City State Zip Code  
Rapid City SD 57709-9163

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

Name of Employer Self Occupation Insurance Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 27 / 2006

Transaction ID: 60710.C17652

Amount of Each Receipt this Period  
250.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Paul S Stoner Md, JR

Mailing Address 2010 Sterling Pointe Ct

City State Zip Code  
League City TX 77573-3933

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

Name of Employer NASA Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 27 / 2006

Transaction ID: 60710.C17695

Amount of Each Receipt this Period  
250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **750.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 75
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael J Lynd

Mailing Address 5710 NW Expwy

City San Antonio State TX Zip Code 78201

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

Name of Employer The Lynd Co Occupation Real Estate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 0 6

Transaction ID: 60710.C17781

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 4650 Washington Blvd Apt 304

City Arlington State VA Zip Code 22201-5740

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

Name of Employer C&M Occupation attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 0 6

Transaction ID: 60710.C17869

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 5394 Hilltop Dr

City Bay City State MI Zip Code 48706-3445

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

Name of Employer Northern Concrete Pipe Inc Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 0 6

Transaction ID: 60710.C17875

Amount of Each Receipt this Period  
250.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	76840.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 75
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A.</b> National Association of Convenience PAC Mailing Address 1600 Duke St		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006 <b>Transaction ID:</b> 60710.C17810
City State Zip Code Alexandria VA 22314-3466	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b>	Receipt	
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> National Assoc of Small Business PAC Mailing Address 666 11th St NW Ste 750		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006 <b>Transaction ID:</b> 60710.C17885
City State Zip Code Washington DC 20001-4538	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b>	Receipt	
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> National Milk Producers Federation PAC Mailing Address 2101 Wilson Blvd Ste 400		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006 <b>Transaction ID:</b> 60710.C17867
City State Zip Code Arlington VA 22201-3062	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>	Receipt	
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 / 75
	(check only one)	
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. TYPAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 601 Pennsylvania Ave NW Ste 750 South		<b>Transaction ID:</b> 60710.C17870	
City Washington State DC Zip Code 20004-2601	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b> C00169821		Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. NEW PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address PO Box 7480		<b>Transaction ID:</b> 60710.C17871	
City Visalia State CA Zip Code 93290-7480	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Auction Market PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 141 W Jackson Blvd		<b>Transaction ID:</b> 60710.C17896	
City Chicago State IL Zip Code 60604-2929	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 40 / 75
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

**A.** Full Name (Last, First, Middle Initial)  
Federal Express PAC

Mailing Address 101 Constitution Ave NW Ste 801

City State Zip Code  
Washington DC 20001-2133

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	6

Transaction ID: 60710.C17897

Amount of Each Receipt this Period  
5000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	13000.00



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 75
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Charles Schwab & Co Inc		Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2006	
Mailing Address 101 Montgomery St		<b>Transaction ID:</b> 60622.C16437	
City State Zip Code San Francisco CA 94104-4104	Amount of Each Receipt this Period 928.21		
FEC ID number of contributing federal political committee. <b>C</b>	Interest Received		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2807.78		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Charles Schwab & Co Inc		Date of Receipt M M / D D / Y Y Y Y Y 05 / 31 / 2006	
Mailing Address 101 Montgomery St		<b>Transaction ID:</b> 60622.C16485	
City State Zip Code San Francisco CA 94104-4104	Amount of Each Receipt this Period 829.48		
FEC ID number of contributing federal political committee. <b>C</b>	Interest Received		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 3637.26		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Charles Schwab & Co Inc		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2006	
Mailing Address 101 Montgomery St		<b>Transaction ID:</b> 60710.C17898	
City State Zip Code San Francisco CA 94104-4104	Amount of Each Receipt this Period 896.02		
FEC ID number of contributing federal political committee. <b>C</b>	Interest Received		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 4533.28		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2653.71
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	2653.71

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 42 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Qwest</b>		<b>Transaction ID:</b> 60622.E544 <b>Date of Disbursement</b> MM / DD / YYYY 05 / 22 / 2006
Mailing Address PO Box 91104		Amount of Each Disbursement this Period 112.76
City Seattle State WA Zip Code 98111-9204	TELEPHONE SERVICE	
Purpose of Disbursement TELEPHONE SERVICE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Xcel Energy</b>		<b>Transaction ID:</b> 60622.E500 <b>Date of Disbursement</b> MM / DD / YYYY 04 / 24 / 2006
Mailing Address PO Box 9477		Amount of Each Disbursement this Period 39.11
City Minneapolis State MN Zip Code 55484-0001	UTILITIES	
Purpose of Disbursement UTILITIES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Van Brunt on Phillips LLC</b>		<b>Transaction ID:</b> 60710.E577 <b>Date of Disbursement</b> MM / DD / YYYY 06 / 26 / 2006
Mailing Address 3130 W 57th St Ste 112		Amount of Each Disbursement this Period 7.19
City Sioux Falls State SD Zip Code 57108-3126	UTILITIES	
Purpose of Disbursement UTILITIES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	159.06
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 43 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Van Brunt on Phillips LLC</b>		<b>Transaction ID:</b> 60622.E541 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 3130 W 57th St Ste 112		Amount of Each Disbursement this Period 21.61
City State Zip Code Sioux Falls SD 57108-3126	UTILITIES	
Purpose of Disbursement UTILITIES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Barb Buell</b>		<b>Transaction ID:</b> 60622.E493 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 224 N Phillips Ave Ste 210		Amount of Each Disbursement this Period 1756.92
City State Zip Code Sioux Falls SD 57104-6014	PAYROLL	
Purpose of Disbursement PAYROLL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. GreatAmerica Leasing</b>		<b>Transaction ID:</b> 60622.E545 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 8742 Innovation Way		Amount of Each Disbursement this Period 92.57
City State Zip Code Chicago IL 60682-0087	OFFICE EQUIPMENT LEASE	
Purpose of Disbursement OFFICE EQUIPMENT LEASE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1871.10
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. The Lukens Company</b>		<b>Transaction ID:</b> 60710.E565 Date of Disbursement MM / DD / YYYY 06 / 02 / 2006
Mailing Address 2800 S Shirlington Rd Ste 900 John Schaller		Amount of Each Disbursement this Period 17900.00
City Arlington State VA Zip Code 22206-3619	Category/ Type  PAC MAILING POSTAGE	
Purpose of Disbursement PAC MAILING POSTAGE		
Candidate Name  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. Jesharelah Sax</b>		<b>Transaction ID:</b> 60710.E574 Date of Disbursement MM / DD / YYYY 06 / 16 / 2006
Mailing Address 48186 265th St		Amount of Each Disbursement this Period 32.32
City Brandon State SD Zip Code 57005-7205	Category/ Type  PAYROLL	
Purpose of Disbursement PAYROLL		
Candidate Name  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. American Express</b>		<b>Transaction ID:</b> 60622.E503 Date of Disbursement MM / DD / YYYY 04 / 25 / 2006
Mailing Address PO Box 360002		Amount of Each Disbursement this Period 26.13
City Fort Lauderdale State FL Zip Code 33336-0002	Category/ Type  CREDIT CARD SERVICE CHARGE	
Purpose of Disbursement CREDIT CARD SERVICE CHARGE		
Candidate Name  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) ..... ▶	17958.45
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 45 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Qwest</b>		Transaction ID: 60710.E583 Date of Disbursement MM / DD / YYYY 06 / 26 / 2006
Mailing Address PO Box 91104		Amount of Each Disbursement this Period 90.84
City Seattle State WA Zip Code 98111-9204	Purpose of Disbursement TELEPHONE SERVICE Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	TELEPHONE SERVICE

Full Name (Last, First, Middle Initial) <b>B. Barb Buell</b>		Transaction ID: 60622.E535 Date of Disbursement MM / DD / YYYY 05 / 16 / 2006
Mailing Address 224 N Phillips Ave Ste 210		Amount of Each Disbursement this Period 1756.92
City Sioux Falls State SD Zip Code 57104-6014	Purpose of Disbursement PAYROLL Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL

Full Name (Last, First, Middle Initial) <b>C. Murphy Goldammer &amp; Prendergast LLP</b>		Transaction ID: 60622.E549 Date of Disbursement MM / DD / YYYY 05 / 22 / 2006
Mailing Address PO Box 1728		Amount of Each Disbursement this Period 1067.94
City Sioux Falls State SD Zip Code 57101-1728	Purpose of Disbursement LEGAL FEES Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	LEGAL FEES

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2915.70
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 46 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		<b>Transaction ID:</b> 60710.E593 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address PO Box 360002		Amount of Each Disbursement this Period 1.43
City Fort Lauderdale State FL Zip Code 33336-0002	Category/ Type  <b>CREDIT CARD SERVICE CHARGE</b>	
Purpose of Disbursement CREDIT CARD SERVICE CHARGE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Janel Domenico</b>		<b>Transaction ID:</b> 60622.E482 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 6
Mailing Address 3116 Circle Hill Rd		Amount of Each Disbursement this Period 5000.00
City Alexandria State VA Zip Code 22305-1606	Category/ Type  <b>PAC FUNDRAISING</b>	
Purpose of Disbursement PAC FUNDRAISING		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Midcontinent Communications</b>		<b>Transaction ID:</b> 60622.E499 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 6
Mailing Address PO Box 5010		Amount of Each Disbursement this Period 34.05
City Sioux Falls State SD Zip Code 57117-5010	Category/ Type  <b>UTILITIES</b>	
Purpose of Disbursement UTILITIES		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>5035.48</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 47 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Rachel Buell</b>		<b>Transaction ID:</b> 60710.E573 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 224 N Phillips Ave Ste 210		Amount of Each Disbursement this Period 72.03	
City Sioux Falls State SD Zip Code 57104-6062	PAYROLL		
Purpose of Disbursement PAYROLL Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Sprint</b>		<b>Transaction ID:</b> 60710.E568 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6	
Mailing Address Customer Service		Amount of Each Disbursement this Period 90.29	
City Taunton State MA Zip Code 02780-	PHONE SERVICE		
Purpose of Disbursement PHONE SERVICE Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:			

Full Name (Last, First, Middle Initial) <b>C. IOS Office Solutions</b>		<b>Transaction ID:</b> 60622.E547 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address PO Box 1386		Amount of Each Disbursement this Period 31.90	
City Storm Lake State IA Zip Code 50588-1386	OFFICE SUPPLIES		
Purpose of Disbursement OFFICE SUPPLIES Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	194.22
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 48 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Lisa Spies</b>		<b>Transaction ID:</b> 60710.E576 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address 2555 Pennsylvania Ave NW Apt 908		Amount of Each Disbursement this Period 114.47
City Washington State DC Zip Code 20037-1637	REIMBURSEMENT: SEE BELOW	
Purpose of Disbursement REIMBURSEMENT: SEE BELOW Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Barb Buell</b>		<b>Transaction ID:</b> 60622.E556 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 224 N Phillips Ave Ste 210		Amount of Each Disbursement this Period 1756.92
City Sioux Falls State SD Zip Code 57104-6014	PAYROLL	
Purpose of Disbursement PAYROLL Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Monty Jenkins Consulting LLC</b>		<b>Transaction ID:</b> 60622.E526 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6
Mailing Address 616 S Lyndale Ave		Amount of Each Disbursement this Period 148.29
City Sioux Falls State SD Zip Code 57104-3923	COMPUTER CONSULTING	
Purpose of Disbursement COMPUTER CONSULTING Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2019.68
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 49 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. GreatAmerica Leasing</b>		<b>Transaction ID:</b> 60710.E581 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address 8742 Innovation Way		Amount of Each Disbursement this Period 92.57
City Chicago State IL Zip Code 60682-0087	OFFICE EQUIPMENT LEASE	
Purpose of Disbursement OFFICE EQUIPMENT LEASE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		<b>Transaction ID:</b> 60710.E563 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address PO Box 360002		Amount of Each Disbursement this Period 3626.09
City Fort Lauderdale State FL Zip Code 33336-0002	CREDIT CARD: SEE BELOW	
Purpose of Disbursement CREDIT CARD: SEE BELOW		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Caucus Room</b>		<b>Transaction ID:</b> 60710.E601 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 401 9th St NW		Amount of Each Disbursement this Period 498.40
City Washington State DC Zip Code 20004-2127	[MEMO ITEM] MEMO: MEALS	
Purpose of Disbursement MEALS		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3718.66
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 50 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

<b>A. Crown Plaza Resort</b> Full Name (Last, First, Middle Initial) Mailing Address 12021 Harbor Blvd City Garden Grove State CA Zip Code 92840-4001 Purpose of Disbursement LODGING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60710.E597</b> Date of Disbursement 06 / 02 / 2006 Amount of Each Disbursement this Period 201.09 <b>[MEMO ITEM]</b> MEMO: LODGING
---	--	---

<b>B. FedEx</b> Full Name (Last, First, Middle Initial) Mailing Address 942 S Shady Grove Rd City Memphis State TN Zip Code 38120-4117 Purpose of Disbursement SHIPPING CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60710.E594</b> Date of Disbursement 06 / 02 / 2006 Amount of Each Disbursement this Period 43.47 <b>[MEMO ITEM]</b> MEMO: SHIPPING CHARGES
---	--	---

<b>C. Gevalia</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 5276 City Clifton State NJ Zip Code 07015-5276 Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60710.E595</b> Date of Disbursement 06 / 02 / 2006 Amount of Each Disbursement this Period 34.39 <b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES
---	--	--

<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 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 51 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. JW Marriott Resort &amp; Spa</b>		Transaction ID: 60710.E596 Date of Disbursement MM / DD / YYYY 06 / 02 / 2006	
Mailing Address 74855 Country Club Dr		Amount of Each Disbursement this Period 1132.80	
City Palm Desert State CA Zip Code 92260-1961	Purpose of Disbursement LODGING	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: LODGING	

Full Name (Last, First, Middle Initial) <b>B. Mortons The Steakhouse</b>		Transaction ID: 60710.E599 Date of Disbursement MM / DD / YYYY 06 / 02 / 2006	
Mailing Address 1050 Connecticut Ave NW		Amount of Each Disbursement this Period 1199.88	
City Washington State DC Zip Code 20036-5303	Purpose of Disbursement MEALS	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: MEALS	

Full Name (Last, First, Middle Initial) <b>C. Park Hyatt</b>		Transaction ID: 60710.E598 Date of Disbursement MM / DD / YYYY 06 / 02 / 2006	
Mailing Address 333 Battery St		Amount of Each Disbursement this Period 426.52	
City San Francisco State CA Zip Code 94111-3230	Purpose of Disbursement LODGING	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: LODGING	

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 52 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Xcel Energy</b>		<b>Transaction ID: 60622.E546</b> Date of Disbursement MM / DD / YYYY 05 / 22 / 2006	
Mailing Address PO Box 9477		Amount of Each Disbursement this Period 38.51	
City Minneapolis State MN Zip Code 55484-0001	Purpose of Disbursement UTILITIES Candidate Name	Category/ Type UTILITIES	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Monty Jenkins Consulting LLC</b>		<b>Transaction ID: 60710.E566</b> Date of Disbursement MM / DD / YYYY 06 / 09 / 2006	
Mailing Address 616 S Lyndale Ave		Amount of Each Disbursement this Period 2542.08	
City Sioux Falls State SD Zip Code 57104-3923	Purpose of Disbursement COMPUTER CONSULTING Candidate Name	Category/ Type COMPUTER CONSULTING	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Skyways</b>		<b>Transaction ID: 60622.E529</b> Date of Disbursement MM / DD / YYYY 05 / 05 / 2006	
Mailing Address PO Box 124 Huron Regional Airport		Amount of Each Disbursement this Period 1294.08	
City Huron State SD Zip Code 57350-0124	Purpose of Disbursement AIRLINE TRAVEL Candidate Name	Category/ Type AIRLINE TRAVEL	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3874.67
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 53 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Braynard Group Inc</b>		Transaction ID: 60622.E555 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 1400 I St NW Ste 400		Amount of Each Disbursement this Period 1290.00
City Washington State DC Zip Code 20005-2294	Category/ Type  WEB SITE DESIGN	
Purpose of Disbursement WEB SITE DESIGN		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Transaction ID: 60622.E551 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6
Mailing Address PO Box 360002		Amount of Each Disbursement this Period 0.71
City Fort Lauderdale State FL Zip Code 33336-0002	Category/ Type  CREDIT CARD SERVICE CHARGE	
Purpose of Disbursement CREDIT CARD SERVICE CHARGE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Jesharelah Sax</b>		Transaction ID: 60622.E554 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 48186 265th St		Amount of Each Disbursement this Period 187.02
City Brandon State SD Zip Code 57005-7205	Category/ Type  PAYROLL	
Purpose of Disbursement PAYROLL		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1477.73
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 54 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. First National Bank</b>		<b>Transaction ID:</b> 60622.E489 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 6
Mailing Address 100 N Phillips Ave		Amount of Each Disbursement this Period 158.72
City Sioux Falls State SD Zip Code 57104-6715	BANK SERVICE CHARGES	
Purpose of Disbursement BANK SERVICE CHARGES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Barb Buell</b>		<b>Transaction ID:</b> 60710.E571 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 224 N Phillips Ave Ste 210		Amount of Each Disbursement this Period 1756.92
City Sioux Falls State SD Zip Code 57104-6014	PAYROLL	
Purpose of Disbursement PAYROLL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Midcontinent Communications</b>		<b>Transaction ID:</b> 60622.E543 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address PO Box 5010		Amount of Each Disbursement this Period 82.77
City Sioux Falls State SD Zip Code 57117-5010	UTILITIES	
Purpose of Disbursement UTILITIES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1998.41
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 55 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Rachel Buell</b>		<b>Transaction ID: 60622.E558</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 224 N Phillips Ave Ste 210		Amount of Each Disbursement this Period 33.25	
City Sioux Falls State SD Zip Code 57104-6062	Purpose of Disbursement PAYROLL		
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type PAYROLL		

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		<b>Transaction ID: 60710.E585</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6	
Mailing Address PO Box 360002		Amount of Each Disbursement this Period 899.59	
City Fort Lauderdale State FL Zip Code 33336-0002	Purpose of Disbursement CREDIT CARD: SEE BELOW		
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type CREDIT CARD: SEE BELOW		

Full Name (Last, First, Middle Initial) <b>C. Charlie Palmer Steak DC</b>		<b>Transaction ID: 60710.E615</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6	
Mailing Address 101 Constitution Ave NW		Amount of Each Disbursement this Period 311.60	
City Washington State DC Zip Code 20001-2133	Purpose of Disbursement MEALS		
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type [MEMO ITEM] MEMO: MEALS		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	932.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. FedEx</b>		Transaction ID: 60710.E611 Date of Disbursement 06 / 26 / 2006	
Mailing Address 942 S Shady Grove Rd		Amount of Each Disbursement this Period 50.58	
City Memphis State TN Zip Code 38120-4117	Purpose of Disbursement SHIPPING CHARGES	Category/ Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

**[MEMO ITEM]**  
MEMO: SHIPPING CHARGES

Full Name (Last, First, Middle Initial) <b>B. Gevalia</b>		Transaction ID: 60710.E613 Date of Disbursement 06 / 26 / 2006	
Mailing Address PO Box 5276		Amount of Each Disbursement this Period 24.00	
City Clifton State NJ Zip Code 07015-5276	Purpose of Disbursement OFFICE SUPPLIES	Category/ Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

**[MEMO ITEM]**  
MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Transaction ID: 60710.E612 Date of Disbursement 06 / 26 / 2006	
Mailing Address Main Post Office		Amount of Each Disbursement this Period 414.20	
City Sioux Falls State SD Zip Code 57104-7500	Purpose of Disbursement PAC POSTAGE	Category/ Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

**[MEMO ITEM]**  
MEMO: PAC POSTAGE

<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 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 57 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. IOS Office Solutions</b>		<b>Transaction ID:</b> 60622.E490 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 6
Mailing Address PO Box 1386		Amount of Each Disbursement this Period 42.15
City Storm Lake	State IA Zip Code 50588-1386	
Purpose of Disbursement OFFICE SUPPLIES		OFFICE SUPPLIES
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. United States Treasury</b>		<b>Transaction ID:</b> 60622.E508 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 6
Mailing Address PO Box 660351		Amount of Each Disbursement this Period 2843.44
City Ogden	State UT Zip Code 84201-0001	
Purpose of Disbursement PAYROLL TAXES		PAYROLL TAXES
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Xcel Energy</b>		<b>Transaction ID:</b> 60710.E580 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address PO Box 9477		Amount of Each Disbursement this Period 17.35
City Minneapolis	State MN Zip Code 55484-0001	
Purpose of Disbursement UTILITIES		UTILITIES
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2902.94
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 58 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. District of Columbia Treasurer</b>		<b>Transaction ID:</b> 60710.E586 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address 1350 Pennsylvania Ave NW		Amount of Each Disbursement this Period 334.33
City Washington State DC Zip Code 20004-3003	Category/ Type  PAYROLL TAXES	
Purpose of Disbursement PAYROLL TAXES		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Janel Domenico</b>		<b>Transaction ID:</b> 60622.E525 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 3116 Circle Hill Rd		Amount of Each Disbursement this Period 5000.00
City Alexandria State VA Zip Code 22305-1606	Category/ Type  PAC FUNDRAISING	
Purpose of Disbursement PAC FUNDRAISING		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Van Brunt on Phillips LLC</b>		<b>Transaction ID:</b> 60710.E578 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address 3130 W 57th St Ste 112		Amount of Each Disbursement this Period 394.94
City Sioux Falls State SD Zip Code 57108-3126	Category/ Type  OFFICE RENT	
Purpose of Disbursement OFFICE RENT		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5729.27
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 59 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. United States Treasury</b>		<b>Transaction ID:</b> 60622.E553 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address PO Box 660351		Amount of Each Disbursement this Period 3487.32
City Ogden State UT Zip Code 84201-0001	PAYROLL TAXES	
Purpose of Disbursement PAYROLL TAXES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. The Lukens Company</b>		<b>Transaction ID:</b> 60622.E548 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 2800 S Shirlington Rd Ste 900 John Schaller		Amount of Each Disbursement this Period 12465.60
City Arlington State VA Zip Code 22206-3619	PAC MAILING	
Purpose of Disbursement PAC MAILING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Van Brunt on Phillips LLC</b>		<b>Transaction ID:</b> 60622.E501 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 6
Mailing Address 3130 W 57th St Ste 112		Amount of Each Disbursement this Period 51.23
City Sioux Falls State SD Zip Code 57108-3126	UTILITIES	
Purpose of Disbursement UTILITIES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	16004.15
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 60 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Sprint</b>		<b>Transaction ID:</b> 60622.E488 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 6
Mailing Address    Customer Service		Amount of Each Disbursement this Period 90.21
City Taunton	State    Zip Code MA    02780-	
Purpose of Disbursement PHONE SERVICE		PHONE SERVICE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:    District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		<b>Transaction ID:</b> 60622.E483 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 6
Mailing Address    PO Box 360002		Amount of Each Disbursement this Period 555.78
City Fort Lauderdale	State    Zip Code FL    33336-0002	
Purpose of Disbursement CREDIT CARD: SEE BELOW		CREDIT CARD: SEE BELOW
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:    District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FedEx</b>		<b>Transaction ID:</b> 60622.E510 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 6
Mailing Address    942 S Shady Grove Rd		Amount of Each Disbursement this Period 16.34
City Memphis	State    Zip Code TN    38120-4117	
Purpose of Disbursement SHIPPING CHARGES		[MEMO ITEM] MEMO: SHIPPING CHARGES
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:    District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	645.99
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 61 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Gevalia</b>		Transaction ID: 60622.E515 Date of Disbursement MM / DD / YYYY 04 / 03 / 2006	
Mailing Address PO Box 5276		Amount of Each Disbursement this Period 27.80	
City Clifton State NJ Zip Code 07015-5276	Purpose of Disbursement OFFICE SUPPLIES	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES	

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Transaction ID: 60622.E513 Date of Disbursement MM / DD / YYYY 04 / 03 / 2006	
Mailing Address Main Post Office		Amount of Each Disbursement this Period 390.00	
City Sioux Falls State SD Zip Code 57104-7500	Purpose of Disbursement PAC POSTAGE	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: PAC POSTAGE	

Full Name (Last, First, Middle Initial) <b>C. Nelson &amp; Nelson CPAs LLP</b>		Transaction ID: 60622.E528 Date of Disbursement MM / DD / YYYY 05 / 04 / 2006	
Mailing Address 1517 S Minnesota Ave		Amount of Each Disbursement this Period 897.14	
City Sioux Falls State SD Zip Code 57105-1750	Purpose of Disbursement ACCOUNTING SERVICE	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	ACCOUNTING SERVICE	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	897.14
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 62 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Charles Schwab &amp; Co Inc</b>		<b>Transaction ID: 60622.E481</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 6
Mailing Address 101 Montgomery St		Amount of Each Disbursement this Period 227.30
City San Francisco State CA Zip Code 94104-4104	INVESTMENT MANAGEMENT FEE	
Purpose of Disbursement INVESTMENT MANAGEMENT FEE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Van Brunt on Phillips LLC</b>		<b>Transaction ID: 60622.E502</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 6
Mailing Address 3130 W 57th St Ste 112		Amount of Each Disbursement this Period 687.50
City Sioux Falls State SD Zip Code 57108-3126	OFFICE RENT	
Purpose of Disbursement OFFICE RENT		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Rachel Buell</b>		<b>Transaction ID: 60622.E507</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 224 N Phillips Ave Ste 210		Amount of Each Disbursement this Period 112.60
City Sioux Falls State SD Zip Code 57104-6062	PAYROLL	
Purpose of Disbursement PAYROLL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1027.40
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 63 / 75

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Van Brunt on Phillips LLC</b>		<b>Transaction ID: 60710.E579</b> Date of Disbursement MM / DD / YYYY 06 / 26 / 2006	
Mailing Address 3130 W 57th St Ste 112		Amount of Each Disbursement this Period 632.30	
City Sioux Falls	State SD	Zip Code 57108-3126	
Purpose of Disbursement PROPERTY TAXES		Category/ Type	
Candidate Name		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) ▼		PROPERTY TAXES	
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Qwest</b>		<b>Transaction ID: 60622.E491</b> Date of Disbursement MM / DD / YYYY 04 / 12 / 2006	
Mailing Address PO Box 91104		Amount of Each Disbursement this Period 66.63	
City Seattle	State WA	Zip Code 98111-9204	
Purpose of Disbursement TELEPHONE SERVICE		Category/ Type	
Candidate Name		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) ▼		TELEPHONE SERVICE	
State: District:			

Full Name (Last, First, Middle Initial) <b>C. American Express</b>		<b>Transaction ID: 60622.E509</b> Date of Disbursement MM / DD / YYYY 04 / 24 / 2006	
Mailing Address PO Box 360002		Amount of Each Disbursement this Period 2597.72	
City Fort Lauderdale	State FL	Zip Code 33336-0002	
Purpose of Disbursement CREDIT CARD: SEE BELOW		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		CREDIT CARD: SEE BELOW	
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3296.65</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Transaction ID: 60622.E518 Date of Disbursement MM / DD / YYYY 04 / 24 / 2006
Mailing Address PO Box 360002		Amount of Each Disbursement this Period 30.00
City Fort Lauderdale State FL Zip Code 33336-0002	Purpose of Disbursement CREDIT CARD SERVICE FEE Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: CREDIT CARD SERVICE FEE

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Transaction ID: 60622.E521 Date of Disbursement MM / DD / YYYY 04 / 24 / 2006
Mailing Address PO Box 360002		Amount of Each Disbursement this Period 40.00
City Fort Lauderdale State FL Zip Code 33336-0002	Purpose of Disbursement ANNUAL PROGRAM FEE Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: ANNUAL PROGRAM FEE

Full Name (Last, First, Middle Initial) <b>C. Gevalia</b>		Transaction ID: 60622.E520 Date of Disbursement MM / DD / YYYY 04 / 24 / 2006
Mailing Address PO Box 5276		Amount of Each Disbursement this Period 17.65
City Clifton State NJ Zip Code 07015-5276	Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 65 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Midwest Airlines</b>		Transaction ID: 60622.E523 Date of Disbursement MM / DD / YYYY 04 / 24 / 2006
Mailing Address 6744 S Howell Ave		Amount of Each Disbursement this Period 704.10
City State Zip Code Oak Creek WI 53154-1422	Purpose of Disbursement AIRLINE TRAVEL Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: AIRLINE TRAVEL

Full Name (Last, First, Middle Initial) <b>B. Northwest Airlines</b>		Transaction ID: 60622.E519 Date of Disbursement MM / DD / YYYY 04 / 24 / 2006
Mailing Address 7500 Airline Dr		Amount of Each Disbursement this Period 665.60
City State Zip Code Minneapolis MN 55450-1101	Purpose of Disbursement AIRLINE TRAVEL Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: AIRLINE TRAVEL

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Transaction ID: 60622.E516 Date of Disbursement MM / DD / YYYY 04 / 24 / 2006
Mailing Address Southeast Station		Amount of Each Disbursement this Period 390.00
City State Zip Code Washington DC 20001-	Purpose of Disbursement PAC POSTAGE Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: PAC POSTAGE

<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 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 66 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		<b>Transaction ID:</b> 60622.E517 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 6
Mailing Address    Main Post Office		Amount of Each Disbursement this Period 390.00
City Sioux Falls	State    Zip Code SD    57104-7500	
Purpose of Disbursement PAC POSTAGE		[MEMO ITEM] MEMO: PAC POSTAGE
Candidate Name		
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. Sprint</b>		<b>Transaction ID:</b> 60622.E531 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address    Customer Service		Amount of Each Disbursement this Period 90.29
City Taunton	State    Zip Code MA    02780-	
Purpose of Disbursement PHONE SERVICE		PHONE SERVICE
Candidate Name		
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. Lisa Spies</b>		<b>Transaction ID:</b> 60710.E592 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address    2555 Pennsylvania Ave NW Apt 908		Amount of Each Disbursement this Period 1730.50
City Washington	State    Zip Code DC    20037-1637	
Purpose of Disbursement PAYROLL		PAYROLL
Candidate Name		
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) ..... ▶	1820.79
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 67 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Lisa Spies</b>		<b>Transaction ID:</b> 60622.E538 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 2555 Pennsylvania Ave NW Apt 908		Amount of Each Disbursement this Period 931.56
City Washington State DC Zip Code 20037-1637	Category/ Type  PAYROLL	
Purpose of Disbursement PAYROLL		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. District of Columbia Treasurer</b>		<b>Transaction ID:</b> 60710.E587 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address 1350 Pennsylvania Ave NW		Amount of Each Disbursement this Period 322.00
City Washington State DC Zip Code 20004-3003	Category/ Type  PAYROLL TAXES	
Purpose of Disbursement PAYROLL TAXES		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. United States Treasury</b>		<b>Transaction ID:</b> 60710.E589 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address PO Box 660351		Amount of Each Disbursement this Period 3862.82
City Ogden State UT Zip Code 84201-0001	Category/ Type  PAYROLL TAXES	
Purpose of Disbursement PAYROLL TAXES		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>5116.38</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 68 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Rachel Buell</b>		<b>Transaction ID: 60622.E536</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 224 N Phillips Ave Ste 210		Amount of Each Disbursement this Period 36.01
City Sioux Falls State SD Zip Code 57104-6062	PAYROLL	
Purpose of Disbursement PAYROLL		Category/ Type
Candidate Name		
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. IOS Office Solutions</b>		<b>Transaction ID: 60710.E582</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address PO Box 1386		Amount of Each Disbursement this Period 50.21
City Storm Lake State IA Zip Code 50588-1386	OFFICE SUPPLIES	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type
Candidate Name		
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. Lisa Spies</b>		<b>Transaction ID: 60710.E572</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 2555 Pennsylvania Ave NW Apt 908		Amount of Each Disbursement this Period 1730.50
City Washington State DC Zip Code 20037-1637	PAYROLL	
Purpose of Disbursement PAYROLL		Category/ Type
Candidate Name		
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) ..... ▶	1816.72
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 69 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Monty Jenkins Consulting LLC</b>		<b>Transaction ID:</b> 60710.E561 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 616 S Lyndale Ave		Amount of Each Disbursement this Period 148.29
City Sioux Falls State SD Zip Code 57104-3923	Category/ Type  COMPUTER CONSULTING	
Purpose of Disbursement COMPUTER CONSULTING		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. GreatAmerica Leasing</b>		<b>Transaction ID:</b> 60622.E498 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 6
Mailing Address 8742 Innovation Way		Amount of Each Disbursement this Period 92.57
City Chicago State IL Zip Code 60682-0087	Category/ Type  OFFICE EQUIPMENT LEASE	
Purpose of Disbursement OFFICE EQUIPMENT LEASE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Murphy Goldammer &amp; Prendergast LLP</b>		<b>Transaction ID:</b> 60622.E484 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 6
Mailing Address PO Box 1728		Amount of Each Disbursement this Period 1225.06
City Sioux Falls State SD Zip Code 57101-1728	Category/ Type  LEGAL FEES	
Purpose of Disbursement LEGAL FEES		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1465.92
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 70 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Barb Buell</b>		<b>Transaction ID:</b> 60710.E590 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 224 N Phillips Ave Ste 210		Amount of Each Disbursement this Period 1756.92
City Sioux Falls State SD Zip Code 57104-6014	PAYROLL	
Purpose of Disbursement PAYROLL		Category/ Type
Candidate Name		
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. Jesharelah Sax</b>		<b>Transaction ID:</b> 60622.E534 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6
Mailing Address 48186 265th St		Amount of Each Disbursement this Period 108.50
City Brandon State SD Zip Code 57005-7205	PAYROLL	
Purpose of Disbursement PAYROLL		Category/ Type
Candidate Name		
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. First National Bank</b>		<b>Transaction ID:</b> 60622.E530 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 100 N Phillips Ave		Amount of Each Disbursement this Period 40.89
City Sioux Falls State SD Zip Code 57104-6715	BANK SERVICE CHARGE	
Purpose of Disbursement BANK SERVICE CHARGE		Category/ Type
Candidate Name		
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) ..... ▶	1906.31
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 71 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Jesharelah Sax		<b>Transaction ID:</b> 60622.E495 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 6
Mailing Address 48186 265th St		Amount of Each Disbursement this Period 64.65
City State Zip Code Brandon SD 57005-7205	Purpose of Disbursement PAYROLL	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL

<b>B.</b> Full Name (Last, First, Middle Initial) Van Brunt on Phillips LLC		<b>Transaction ID:</b> 60622.E542 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 3130 W 57th St Ste 112		Amount of Each Disbursement this Period 687.50
City State Zip Code Sioux Falls SD 57108-3126	Purpose of Disbursement OFFICE RENT	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	OFFICE RENT

<b>C.</b> Full Name (Last, First, Middle Initial) Barb Buell		<b>Transaction ID:</b> 60622.E487 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 6
Mailing Address 224 N Phillips Ave Ste 210		Amount of Each Disbursement this Period 3732.50
City State Zip Code Sioux Falls SD 57104-6014	Purpose of Disbursement PAYROLL	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4484.65
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 72 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Rachel Buell</b>		<b>Transaction ID:</b> 60622.E494 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 224 N Phillips Ave Ste 210		Amount of Each Disbursement this Period 72.03
City Sioux Falls State SD Zip Code 57104-6062	PAYROLL	
Purpose of Disbursement PAYROLL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Barb Buell</b>		<b>Transaction ID:</b> 60622.E506 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 224 N Phillips Ave Ste 210		Amount of Each Disbursement this Period 1756.92
City Sioux Falls State SD Zip Code 57104-6014	PAYROLL	
Purpose of Disbursement PAYROLL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Sisson Printing Inc</b>		<b>Transaction ID:</b> 60710.E562 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 3500 S Duluth Ave		Amount of Each Disbursement this Period 638.91
City Sioux Falls State SD Zip Code 57105-6416	PAC PRINTING	
Purpose of Disbursement PAC PRINTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2467.86
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 73 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Lisa Spies</b>		<b>Transaction ID:</b> 60622.E557 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 2555 Pennsylvania Ave NW Apt 908		Amount of Each Disbursement this Period 1730.50
City Washington State DC Zip Code 20037-1637	PAYROLL	
Purpose of Disbursement PAYROLL Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Rachel Buell</b>		<b>Transaction ID:</b> 60710.E591 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 224 N Phillips Ave Ste 210		Amount of Each Disbursement this Period 99.74
City Sioux Falls State SD Zip Code 57104-6062	PAYROLL	
Purpose of Disbursement PAYROLL Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. First National Bank</b>		<b>Transaction ID:</b> 60710.E567 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address 100 N Phillips Ave		Amount of Each Disbursement this Period 55.80
City Sioux Falls State SD Zip Code 57104-6715	BANK SERVICE CHARGES	
Purpose of Disbursement BANK SERVICE CHARGES Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1886.04
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	93624.21

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 74 / 75

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Bilbray for Congress</b>		Transaction ID: 60622.E550 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 5703 Oberlin Dr Ste 101		Amount of Each Disbursement this Period 1000.00
City San Diego State CA Zip Code 92121-1743	Category/ Type  CONTRIBUTIONS	
Purpose of Disbursement CONTRIBUTIONS		
Candidate Name BRIAN P BILBRAY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 50		

Full Name (Last, First, Middle Initial) <b>B. Coleman for Senate</b>		Transaction ID: 60622.E496 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6
Mailing Address 7300 Hudson Blvd N Ste 270A		Amount of Each Disbursement this Period 5000.00
City Saint Paul State MN Zip Code 55128-7143	Category/ Type  CONTRIBUTION	
Purpose of Disbursement CONTRIBUTION		
Candidate Name NORM COLEMAN		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MN District: 00		

Full Name (Last, First, Middle Initial) <b>C. Coleman for Senate</b>		Transaction ID: 60622.E497 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6
Mailing Address 7300 Hudson Blvd N Ste 270A		Amount of Each Disbursement this Period 4500.00
City Saint Paul State MN Zip Code 55128-7143	Category/ Type  CONTRIBUTION	
Purpose of Disbursement CONTRIBUTION		
Candidate Name NORM COLEMAN		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MN District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	10500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 75 / 75

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Heartland Values PAC

Full Name (Last, First, Middle Initial) <b>A. Nebraska Families for Pete Ricketts Inc</b>		<b>Transaction ID:</b> 60622.E532 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address PO Box 24705		Amount of Each Disbursement this Period 5000.00  CONTRIBUTION
City Omaha State NE Zip Code 68124-0705		
Purpose of Disbursement CONTRIBUTION Candidate Name PETE RICKETTS Category/Type		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NE District: 00		

Full Name (Last, First, Middle Initial) <b>B. Raese for Senate</b>		<b>Transaction ID:</b> 60710.E575 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6
Mailing Address PO Box 262		Amount of Each Disbursement this Period 3000.00  CONTRIBUTION
City Morgantown State WV Zip Code 26507-0262		
Purpose of Disbursement CONTRIBUTION Candidate Name JOHN REEVES RAESE Category/Type		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WV District: 00		

Full Name (Last, First, Middle Initial) <b>C. Bruce Whalen for US Congress</b>		<b>Transaction ID:</b> 60710.E564 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address PO Box 3080		Amount of Each Disbursement this Period 5000.00  CONTRIBUTION
City Rapid City State SD Zip Code 57709-3080		
Purpose of Disbursement CONTRIBUTION Candidate Name BRUCE W WHALEN Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: SD District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	13000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	23500.00