

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**ABSOLUTE ENERGY PAC**

ADDRESS (number and street) **1372 STATE LINE ROAD**  
 Check if different than previously reported. (ACC) **ST. ANSGAR IA 50472**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00455048** 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 Year-End 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 (12S)  
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  /  /  through  /  /   
**07 01 2016 09 30 2016**

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Schwarck, Chris, , ,  
Type or Print Name of Treasurer

Signature of Treasurer *Schwarck, Chris, , ,* [Electronically Filed] Date  /  /   
**10 03 2016**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**ABSOLUTE ENERGY PAC**

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

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2016"/>  |                         | 102751.59                         |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | 123786.59               |                                   |
| (c) Total Receipts (from Line 19) .....  | 31200.00                | 56235.00                          |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | 154986.59               | 158986.59                         |
| 7. Total Disbursements (from Line 31).....   | 58158.00                | 62158.00                          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | 96828.59                | 96828.59                          |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**ABSOLUTE ENERGY PAC**

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

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 25685.00                      | 41735.00                          |
| (ii) Unitemized .....   | 5515.00                       | 14500.00                          |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶   | 31200.00                      | 56235.00                          |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....  | 0.00                          | 0.00                              |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 31200.00                      | 56235.00                          |
| 12. Transfers From Affiliated/Other Party Committees.....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....  | 0.00                          | 0.00                              |
| 14. Loan Repayments Received.....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....   | 0.00                          | 0.00                              |
| 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 Transfers (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)).....▶                         | 31200.00                      | 56235.00                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶                                   | 31200.00                      | 56235.00                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated 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 .....   | 8.00                          | 8.00                              |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 8.00                          | 8.00                              |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 19500.00                      | 23500.00                          |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....                                 | 38650.00                      | 38650.00                          |
| 30. Federal Election Activity (52 U.S.C. § 30101(20))  |                               |                                   |
| (a) Allocated 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)) ..      | 58158.00                      | 62158.00                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 58158.00                      | 62158.00                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                            | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 31200.00                              | 56235.00                                  |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                                  | 0.00                                      |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 31200.00                              | 56235.00                                  |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 8.00                                  | 8.00                                      |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                                  | 0.00                                      |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 8.00                                  | 8.00                                      |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 6 OF 57  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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)  
**ABSOLUTE ENERGY PAC**

**A. ANDERSON, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 149  
 City NEW HAMPTON State IA Zip Code 50659  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 21 / 2016  
**Transaction ID : SA11AI.6346**  
 Amount of Each Receipt this Period 150.00  
 Memo Item CONTRIBUTION

**B. ANDERSON, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4562 ZINNIA AVENUE  
 City ST. ANSGAR State IA Zip Code 50472  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1636.00

Date of Receipt 07 / 29 / 2016  
**Transaction ID : SA11AI.6347**  
 Amount of Each Receipt this Period 636.00  
 Memo Item CONTRIBUTION

**C. Bingham, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1515 West Maple Avenue  
 City Red Wing State MN Zip Code 55066  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 20 / 2016  
**Transaction ID : SA11AI.6299**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1036.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 7 OF 57                 |
|   | (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)  
**ABSOLUTE ENERGY PAC**

**A. BRUMM, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 304 CIMMIYOTTI PARKWAY  
 City STACYVILLE State IA Zip Code 50476  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PINNICON FARMS Occupation (for Individual) MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 08 / 16 / 2016  
**Transaction ID : SA11AI.6401**  
 Amount of Each Receipt this Period 650.00  
 Memo Item CONTRIBUTION

**B. CALEASE, DALE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1495 - 180TH STREET  
 City WAVERLY State IA Zip Code 50677  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 06 / 2016  
**Transaction ID : SA11AI.6577**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**C. CALEASE, JERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1826 130th STREET  
 City WAVERLY State IA Zip Code 50677  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 16 / 2016  
**Transaction ID : SA11AI.6408**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1650.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

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

FOR LINE NUMBER: PAGE 8 OF 57  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CARRUTHERS, CYNTHIA, , ,**

Mailing Address **8811 NEW CASTLE DRIVE**

City **FORT MYERS**    State **FL**    Zip Code **33908**

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

Name of Employer (for Individual) **N/A**    Occupation (for Individual) **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt  
**07 / 29 / 2016**

**Transaction ID : SA11AI.6303**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CHRISTENSEN, STEVEN, , ,**

Mailing Address **10508 ELM AVENUE**

City **RICEVILLE**    State **IA**    Zip Code **50466**

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

Name of Employer (for Individual) **SELF**    Occupation (for Individual) **FARMER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
**07 / 28 / 2016**

**Transaction ID : SA11AI.6304**

Amount of Each Receipt this Period  
**150.00**

Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CLARK, WILLIAM, , ,**

Mailing Address **3556 NOBLE AVENUE**

City **OSAGE**    State **IA**    Zip Code **50461**

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

Name of Employer (for Individual) **JOHNSON CHEMICALS**    Occupation (for Individual) **SELF**

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**07 / 26 / 2016**

**Transaction ID : SA11AI.6305**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... **350.00**

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



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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 9 OF 57  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. DOUGAN, LOIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 117 BRITTANY WAY SE  
 City GRAND MEADOW State MN Zip Code 55936  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 25 / 2016**  
**Transaction ID : SA11AI.6307**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**B. DOUGAN, SUE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21567 - 770TH AVENUE  
 City OSTRANDER State MN Zip Code 55961  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt **08 / 16 / 2016**  
**Transaction ID : SA11AI.6412**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**C. DURHMAN, DARWYN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1682 CENTURY VALLEY ROAD NE  
 City ROCHESTER State MN Zip Code 55906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 20 / 2016**  
**Transaction ID : SA11AI.6310**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 850.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 10 OF 57   |
| <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)  
**ABSOLUTE ENERGY PAC**

**A. EASTMAN, STEVE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3178 430TH STREET

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>RICEVILLE | State<br>IA | Zip Code<br>50466 |
|-------------------|-------------|-------------------|

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

|   |  |
|---|--|
| Name of Employer (for Individual)<br>FARMERS FEED & GRAIN | Occupation (for Individual)<br>MANAGER |
|---|--|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    | / | 16    | / | 2016        |

**Transaction ID : SA11AI.6411**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**B. EDGINGTON, CHRIS, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4476 DOGWOOD AVENUE

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>ST. ANSGAR | State<br>IA | Zip Code<br>50472 |
|--------------------|-------------|-------------------|

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

|   |                                       |
|---|---------------------------------------|
| Name of Employer (for Individual)<br>SELF | Occupation (for Individual)<br>FARMER |
|---|---------------------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 08    | / | 2016        |

**Transaction ID : SA11AI.6277**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C. EDGINGTON, CHRIS, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4476 DOGWOOD AVENUE

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>ST. ANSGAR | State<br>IA | Zip Code<br>50472 |
|--------------------|-------------|-------------------|

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

|   |                                       |
|---|---------------------------------------|
| Name of Employer (for Individual)<br>SELF | Occupation (for Individual)<br>FARMER |
|---|---------------------------------------|

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1075.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    | / | 15    | / | 2016        |

**Transaction ID : SA11AI.6383**

Amount of Each Receipt this Period  
75.00

Memo Item  
CONTRIBUTION

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1575.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 11 OF 57   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. EDGINGTON, CHRIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4476 DOGWOOD AVENUE  
 City ST. ANSGAR State IA Zip Code 50472  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1325.00

Date of Receipt 08 / 17 / 2016  
**Transaction ID : SA11AI.6406**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**B. EDGINGTON, JACK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 208 HARMONY DRIVE  
 City ST. ANSGAR State IA Zip Code 50472  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 08 / 15 / 2016  
**Transaction ID : SA11AI.6398**  
 Amount of Each Receipt this Period 400.00  
 Memo Item CONTRIBUTION

**C. FALK, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address BOX 189  
 City ST. ANSGAR State IA Zip Code 50472  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LR FALK CONSTRUCTION COMPANY Occupation (for Individual) CONSTRUCTION  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 28 / 2016  
**Transaction ID : SA11AI.6311**  
 Amount of Each Receipt this Period 700.00  
 Memo Item CONTRIBUTION

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1350.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 12 OF 57 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><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)  
**ABSOLUTE ENERGY PAC**

**A. FALK, LINDSEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14852 HWY 105

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>ST. ANSGAR | State<br>IA | Zip Code<br>50472 |
|--------------------|-------------|-------------------|

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

|   |  |
|---|--|
| Name of Employer (for Individual)<br>L.R. FALK CONSTRUCTION | Occupation (for Individual)<br>PRESIDENT |
|---|--|

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 16 / 2016

**Transaction ID : SA11AI.6371**

Amount of Each Receipt this Period  
300.00

Memo Item  
CONTRIBUTION

**B. FALK, LINDSEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14852 HWY 105

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>ST. ANSGAR | State<br>IA | Zip Code<br>50472 |
|--------------------|-------------|-------------------|

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

|   |  |
|---|--|
| Name of Employer (for Individual)<br>L.R. FALK CONSTRUCTION | Occupation (for Individual)<br>PRESIDENT |
|---|--|

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1150.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 16 / 2016

**Transaction ID : SA11AI.6405**

Amount of Each Receipt this Period  
450.00

Memo Item  
CONTRIBUTION

**C. FIDDELKE, RANDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1337 CANDLE ROAD

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>MANCHESTER | State<br>IA | Zip Code<br>52057 |
|--------------------|-------------|-------------------|

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

|   |                                       |
|---|---------------------------------------|
| Name of Employer (for Individual)<br>SELF | Occupation (for Individual)<br>FARMER |
|---|---------------------------------------|

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 03 / 2016

**Transaction ID : SA11AI.6291**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

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

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 13 OF 57                |
|   | (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"/> 12  |
|   |                              | <input type="checkbox"/> 15  |
|   |                              | <input type="checkbox"/> 16  |
|   |                              | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. FOLLMUTH, STEVE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4615 KIRKWOOD AVENUE

City STACYVILLE State IA Zip Code 50476

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

Name of Employer (for Individual) SELF Occupation (for Individual) FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 25 / 2016

**Transaction ID : SA11AI.6312**

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

**B. GOODSSELL, CRAIG, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 77653 STATE HIGHWAY 16

City SPRING VALLEY State MN Zip Code 55975

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

Name of Employer (for Individual) SELF Occupation (for Individual) FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 23 / 2016

**Transaction ID : SA11AI.6298**

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**C. Grafe, Brad, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 414

City Grand Meadow State MN Zip Code 55936

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

Name of Employer (for Individual) Self Occupation (for Individual) Farmer

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2016

**Transaction ID : SA11AI.6313**

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1100.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 14 OF 57   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. GROTZ, DENNIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19090 HWY 105  
 City AUSTIN State MN Zip Code 55912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2016  
**Transaction ID : SA11AI.6314**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

**B. HELLE, JEFF, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12649 580TH AVENUE  
 City LYLE State MN Zip Code 55953  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 08 / 2016  
**Transaction ID : SA11AI.6294**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 CONTRIBUTION

**C. HENGESTEG, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4840 OLIVE AVENUE  
 City NORTHWOOD State IA Zip Code 50459  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NORTH COUNTRY EQUIPMENT Occupation (for Individual) SALESMAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 20 / 2016  
**Transaction ID : SA11AI.6316**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 CONTRIBUTION

|  |        |
|--|--------|
| <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) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 15 OF 57   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. HERICKHOFF, BERNIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10875 145TH STREET  
 City VILLARD State MN Zip Code 56385  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 28 / 2016  
**Transaction ID : SA11AI.6317**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**B. Jahr, Peter, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4701 Echo Avenue  
 City St. Ansgar State IA Zip Code 50472  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Farmer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 08 / 16 / 2016  
**Transaction ID : SA11AI.6378**  
 Amount of Each Receipt this Period 105.00  
 Memo Item CONTRIBUTION

**C. JOHNSON, DUANE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 815 NORTH 12TH STREET  
 City OSAGE State IA Zip Code 50461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 07 / 28 / 2016  
**Transaction ID : SA11AI.6353**  
 Amount of Each Receipt this Period 60.00  
 Memo Item CONTRIBUTION

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 415.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |               |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 16 OF 57 |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 11b<br><input type="checkbox"/> 11c<br><input type="checkbox"/> 12<br><input type="checkbox"/> 13<br><input type="checkbox"/> 14<br><input type="checkbox"/> 15<br><input type="checkbox"/> 16<br><input type="checkbox"/> 17 |               |

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. JOHNSON, DUANE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 815 NORTH 12TH STREET  
 City OSAGE State IA Zip Code 50461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 08 / 16 / 2016  
**Transaction ID : SA11AI.6404**  
 Amount of Each Receipt this Period 350.00  
 Memo Item CONTRIBUTION

**B. JOHNSON, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1209 RIDGE ROAD SOUTH  
 City PRESTON State MN Zip Code 55965  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 26 / 2016  
**Transaction ID : SA11AI.6320**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**C. JOHNSON, WAYNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 36673 HWY 69  
 City FOREST CITY State IA Zip Code 50436  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 15 / 2016  
**Transaction ID : SA11AI.6283**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

|  |        |
|--|--------|
| <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) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 17 OF 57                |
|   | <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)  
**ABSOLUTE ENERGY PAC**

**A. Kappers, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11817 Rambling Drive  
 City Spring Valley State MN Zip Code 55975  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 25 / 2016  
**Transaction ID : SA11AI.6322**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
**CONTRIBUTION**

**B. Kolling, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22861 Oak Hill Dr  
 City Spring Valley State MN Zip Code 55975  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Home Federal Savings Bank Occupation (for Individual) Accounting Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 26 / 2016  
**Transaction ID : SA11AI.6364**  
 Amount of Each Receipt this Period 225.00  
 Memo Item  
**CONTRIBUTION**

**C. Kolling, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22861 Oak Hill Dr  
 City Spring Valley State MN Zip Code 55975  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Home Federal Savings Bank Occupation (for Individual) Accounting Mgr  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 08 / 16 / 2016  
**Transaction ID : SA11AI.6418**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
**CONTRIBUTION**

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 515.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 18 OF 57                |
|   | <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)  
**ABSOLUTE ENERGY PAC**

**A. Kuehn, Jon, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11802 Rambling Drive

|                       |             |                   |
|-----------------------|-------------|-------------------|
| City<br>Spring Valley | State<br>MN | Zip Code<br>55975 |
|-----------------------|-------------|-------------------|

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

|   |  |
|---|--|
| Name of Employer (for Individual)<br>Kuehn Motors | Occupation (for Individual)<br>Manager |
|---|--|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 21    |   | 2016        |

**Transaction ID : SA11AI.6325**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**B. Kuehn, Jon, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11802 Rambling Drive

|                       |             |                   |
|-----------------------|-------------|-------------------|
| City<br>Spring Valley | State<br>MN | Zip Code<br>55975 |
|-----------------------|-------------|-------------------|

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

|   |  |
|---|--|
| Name of Employer (for Individual)<br>Kuehn Motors | Occupation (for Individual)<br>Manager |
|---|--|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1150.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 16    |   | 2016        |

**Transaction ID : SA11AI.6391**

Amount of Each Receipt this Period  
750.00

Memo Item  
CONTRIBUTION

**C. Laures, Stanley, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2325 Linn Avenue

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>New Hampton | State<br>IA | Zip Code<br>50659 |
|---------------------|-------------|-------------------|

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

|   |                                       |
|---|---------------------------------------|
| Name of Employer (for Individual)<br>Self | Occupation (for Individual)<br>Farmer |
|---|---------------------------------------|

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 01    |   | 2016        |

**Transaction ID : SA11AI.6365**

Amount of Each Receipt this Period  
300.00

Memo Item  
CONTRIBUTION

|   |         |
|---|---------|
| <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) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 19 OF 57   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. LOFTIN, SANDRA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 542

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>DERIDDER | State<br>LA | Zip Code<br>70634 |
|------------------|-------------|-------------------|

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

|  |  |
|--|--|
| Name of Employer (for Individual)<br>RETIRED | Occupation (for Individual)<br>RETIRED |
|--|--|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 02 / 2016

**Transaction ID : SA11AI.6292**

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

**B. MAUST, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 800 OAK DRIVE NW

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>PRESTON | State<br>MN | Zip Code<br>55965 |
|-----------------|-------------|-------------------|

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

|   |  |
|---|--|
| Name of Employer (for Individual)<br>NONE | Occupation (for Individual)<br>RETIRED |
|---|--|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
460.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 16 / 2016

**Transaction ID : SA11AI.6403**

Amount of Each Receipt this Period  
400.00

Memo Item CONTRIBUTION

**C. MAUST, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 800 OAK DRIVE NW

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>PRESTON | State<br>MN | Zip Code<br>55965 |
|-----------------|-------------|-------------------|

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

|   |  |
|---|--|
| Name of Employer (for Individual)<br>NONE | Occupation (for Individual)<br>RETIRED |
|---|--|

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
960.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 16 / 2016

**Transaction ID : SA11AI.6410**

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

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

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 20 OF 57   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

|                             |                             |                             |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. MITCHELL, MARK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1788 HWY 4  
 City ESTHERVILLE State IA Zip Code 51334  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 07 / 20 / 2016  
**Transaction ID : SA11AI.6327**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**B. NELSON, ROGER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 115 4TH STREET  
 City LYLE State MN Zip Code 55953  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 25 / 2016  
**Transaction ID : SA11AI.6329**  
 Amount of Each Receipt this Period 200.00  
 Memo Item CONTRIBUTION

**C. OAKLAND, GARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2347 - 500TH STREET  
 City ST. ANSGAR State IA Zip Code 50472  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 08 / 16 / 2016  
**Transaction ID : SA11AI.6407**  
 Amount of Each Receipt this Period 300.00  
 Memo Item CONTRIBUTION

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 550.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 21 OF 57                |
|   | <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)  
**ABSOLUTE ENERGY PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Olson, Troy, , ,

Mailing Address 21656 - 880th Avenue

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Oakland | State<br>MN | Zip Code<br>56007 |
|-----------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>Absolute Energy, L.L.C. | Occupation (for Individual)<br>Grain Merchandiser |
|--|---|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
08 / 18 / 2016

**Transaction ID : SA11AI.6392**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
PATTERSON, CHRISTOPHER, , ,

Mailing Address 1879 - 500TH STREET

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>ST. ANSGAR | State<br>IA | Zip Code<br>50472-8667 |
|--------------------|-------------|------------------------|

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

|   |                                       |
|---|---------------------------------------|
| Name of Employer (for Individual)<br>SELF | Occupation (for Individual)<br>FARMER |
|---|---------------------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
07 / 22 / 2016

**Transaction ID : SA11AI.6331**

Amount of Each Receipt this Period  
750.00

Memo Item  
CONTRIBUTION

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
PATTERSON, MIKE, , ,

Mailing Address 4461 KIRKWOOD AVENUE

|               |             |                   |
|---------------|-------------|-------------------|
| City<br>OSAGE | State<br>IA | Zip Code<br>50461 |
|---------------|-------------|-------------------|

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

|   |                                       |
|---|---------------------------------------|
| Name of Employer (for Individual)<br>SELF | Occupation (for Individual)<br>FARMER |
|---|---------------------------------------|

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
08 / 16 / 2016

**Transaction ID : SA11AI.6390**

Amount of Each Receipt this Period  
300.00

Memo Item  
CONTRIBUTION

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1150.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 22 OF 57   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. PATTERSON, MIKE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4461 KIRKWOOD AVENUE  
 City OSAGE State IA Zip Code 50461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt 08 / 16 / 2016  
**Transaction ID : SA11AI.6400**  
 Amount of Each Receipt this Period 1600.00  
 Memo Item CONTRIBUTION

**B. PAYNE, VERLIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13905 - 161ST AVENUE  
 City SPRING VALLEY State MN Zip Code 55975  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 20 / 2016  
**Transaction ID : SA11AI.6333**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**C. POPP, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3497 ORCHARD ROAD  
 City OSAGE State IA Zip Code 50461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) POPP EXCAVATING Occupation (for Individual) EXCAVATING  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 08 / 10 / 2016  
**Transaction ID : SA11AI.6293**  
 Amount of Each Receipt this Period 750.00  
 Memo Item CONTRIBUTION

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 3350.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 23 OF 57   |
| <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)  
**ABSOLUTE ENERGY PAC**

**A. POPP, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3497 ORCHARD ROAD  
 City OSAGE State IA Zip Code 50461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) POPP EXCAVATING Occupation (for Individual) EXCAVATING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1280.00

Date of Receipt 08 / 10 / 2016  
**Transaction ID : SA11AI.6354**  
 Amount of Each Receipt this Period 30.00  
 Memo Item CONTRIBUTION

**B. POPP, KURT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2322 - 350TH STREET  
 City OSAGE State IA Zip Code 50461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) POPP EXCAVATING Occupation (for Individual) EXCAVATING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 31 / 2016  
**Transaction ID : SA11AI.6332**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**C. POPP, KURT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2322 - 350TH STREET  
 City OSAGE State IA Zip Code 50461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) POPP EXCAVATING Occupation (for Individual) EXCAVATING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2300.00

Date of Receipt 08 / 16 / 2016  
**Transaction ID : SA11AI.6369**  
 Amount of Each Receipt this Period 300.00  
 Memo Item CONTRIBUTION

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1330.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 24 OF 57   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

|                             |                             |                             |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. POPP, KURT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2322 - 350TH STREET  
 City OSAGE State IA Zip Code 50461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) POPP EXCAVATING Occupation (for Individual) EXCAVATING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2750.00

Date of Receipt 08 / 16 / 2016  
**Transaction ID : SA11AI.6396**  
 Amount of Each Receipt this Period 450.00  
 Memo Item CONTRIBUTION

**B. REICKS, RAY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3843 YANKEE AVENUE  
 City CRESCO State IA Zip Code 52136  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 25 / 2016  
**Transaction ID : SA11AI.6335**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. SCHWADE, DALE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14371 - 50TH STREET  
 City LIME SPRINGS State IA Zip Code 52155  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 07 / 2016  
**Transaction ID : SA11AI.6289**  
 Amount of Each Receipt this Period 200.00  
 Memo Item CONTRIBUTION

|   |        |
|---|--------|
| <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) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 25 OF 57                |
|   | <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)  
**ABSOLUTE ENERGY PAC**

**A. Schwarck, Dan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13328 Addison Avenue  
 City Riceville State IA Zip Code 50466  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Farmer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 08 / 16 / 2016  
**Transaction ID : SA11AI.6399**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
**CONTRIBUTION**

**B. SCHWARCK, HOLLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4670 DANCER AVENUE  
 City ST. ANSGAR State IA Zip Code 50472  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Holly's Trees Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 16 / 2016  
**Transaction ID : SA11AI.6372**  
 Amount of Each Receipt this Period 225.00  
 Memo Item  
**CONTRIBUTION**

**C. SCHWARCK, HOLLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4670 DANCER AVENUE  
 City ST. ANSGAR State IA Zip Code 50472  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Holly's Trees Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1125.00

Date of Receipt 08 / 16 / 2016  
**Transaction ID : SA11AI.6394**  
 Amount of Each Receipt this Period 900.00  
 Memo Item  
**CONTRIBUTION**

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1625.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 26 OF 57                |
|   | <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)  
**ABSOLUTE ENERGY PAC**

**A. SCHWARCK, HOLLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4670 DANCER AVENUE  
 City ST. ANSGAR State IA Zip Code 50472  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Holly's Trees Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1145.00

Date of Receipt 08 / 16 / 2016  
**Transaction ID : SA11AI.6417**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
**CONTRIBUTION**

**B. SCHWARCK, REED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 420 S WINTER STREET  
 City SAINT ANSGAR State IA Zip Code 50472  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SCHWARCK AGENCY Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 16 / 2016  
**Transaction ID : SA11AI.6387**  
 Amount of Each Receipt this Period 75.00  
 Memo Item  
**CONTRIBUTION**

**C. SCHWARCK, REED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 420 S WINTER STREET  
 City SAINT ANSGAR State IA Zip Code 50472  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SCHWARCK AGENCY Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 16 / 2016  
**Transaction ID : SA11AI.6397**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
**CONTRIBUTION**

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 145.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 27 OF 57                |
|   | <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)  
**ABSOLUTE ENERGY PAC**

**A. Spotts, Marcus, , Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16906 Warbler Avenue

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Nora Springs | State<br>IA | Zip Code<br>50458 |
|----------------------|-------------|-------------------|

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

|   |                                       |
|---|---------------------------------------|
| Name of Employer (for Individual)<br>Self | Occupation (for Individual)<br>Farmer |
|---|---------------------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 16    |   | 2016        |

**Transaction ID : SA11AI.6395**

Amount of Each Receipt this Period  
175.00

Memo Item  
CONTRIBUTION

**B. STEINBERG, DAVID, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1296 - 390TH STREET

|               |             |                   |
|---------------|-------------|-------------------|
| City<br>OSAGE | State<br>IA | Zip Code<br>50461 |
|---------------|-------------|-------------------|

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

|   |                                       |
|---|---------------------------------------|
| Name of Employer (for Individual)<br>SELF | Occupation (for Individual)<br>FARMER |
|---|---------------------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 03    |   | 2016        |

**Transaction ID : SA11AI.6576**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**C. Sukup, Steven, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1405 N Shore Dr

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Clear Lake | State<br>IA | Zip Code<br>50428 |
|--------------------|-------------|-------------------|

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

|  |  |
|--|--|
| Name of Employer (for Individual)<br>Sukup Manufacturing Company | Occupation (for Individual)<br>Industrial Engineer |
|--|--|

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 17    |   | 2016        |

**Transaction ID : SA11AI.6280**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1425.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 28 OF 57                |
|   | <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             |                              |

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)  
**ABSOLUTE ENERGY PAC**

**A. WAGNER, CALVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 845 NORTH STREET  
 City RIDGEWAY State IA Zip Code 52165  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 398.00

Date of Receipt 08 / 04 / 2016  
**Transaction ID : SA11AI.6290**  
 Amount of Each Receipt this Period 199.00  
 Memo Item CONTRIBUTION

**B. WALTERS, LANA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 102 W MAIN STREET  
 City RACINE State MN Zip Code 55967  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 07 / 20 / 2016  
**Transaction ID : SA11AI.6352**  
 Amount of Each Receipt this Period 120.00  
 Memo Item CONTRIBUTION

**C. WALTMAN, WARREN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2001 EASTLAND DRIVE  
 City ALGONA State IA Zip Code 50511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARM  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 26 / 2016  
**Transaction ID : SA11AI.6341**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 819.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 29 OF 57                |
|   | (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"/> 12  |
|   |                              | <input type="checkbox"/> 15  |
|   |                              | <input type="checkbox"/> 16  |
|   |                              | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. Weaver, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13907 Spring Lake Road  
 City Minnetonka State MN Zip Code 55345  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lindquist & Vennum Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 02 / 2016  
**Transaction ID : SA11AI.6366**  
 Amount of Each Receipt this Period 150.00  
 Memo Item  
**CONTRIBUTION**

**B. WESTRUM, TIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12026 NW 133RD CT  
 City MADRID State IA Zip Code 50156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 20 / 2016  
**Transaction ID : SA11AI.6345**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
**CONTRIBUTION**

**C. WISE, KELLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 63031 JACKSON ROAD  
 City ATLANTIC State IA Zip Code 50022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WISE MOTELS INC. Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 21 / 2016  
**Transaction ID : SA11AI.6284**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
**CONTRIBUTION**

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 850.00   |
| <b>TOTAL</b> This Period (last page this line number only)..... | 25685.00 |

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                             |                              |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <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)  
**ABSOLUTE ENERGY PAC**

**A. BLUM FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address 2728 ASBURY ROAD SUITE 400

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement DONATION

Candidate Name **BLUM FOR CONGRESS**

Office Sought:  House  Senate  President  
State: IA District: 01

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 29 / 2016

FEC Identification Number: C00543926  
Transaction ID : **SB23.6433**

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. FRIENDS OF JOHN THUNE**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 841

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement DONATION

Candidate Name **FRIENDS OF JOHN THUNE**

Office Sought:  House  Senate  President  
State: SD District: 00

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 12 / 2016

FEC Identification Number: C  
Transaction ID : **SB23.6275**

Amount of Each Disbursement this Period: 2500.00

Memo Item

**C. GROWTH ENERGY PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 7202 GILES ROAD, SUITE 4-260

City LA VISTA State NE Zip Code 68128

Purpose of Disbursement DONATION

Candidate Name **GROWTH ENERGY PAC**

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Date of Disbursement: 09 / 20 / 2016

FEC Identification Number: C00475665  
Transaction ID : **SB23.6582**

Amount of Each Disbursement this Period: 4000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                             |                              |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <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)  
**ABSOLUTE ENERGY PAC**

Full Name (Last, First, Middle Initial)

**A. IOWA RENEWABLE FUELS ASSOCIATION PAC - IRFA PAC**

Mailing Address 5505 NW 88TH ST  
SUITE 100

City JOHNSTON State IA Zip Code 50131

Purpose of Disbursement  
DONATION

Category/  
Type

Candidate Name  
IOWA RENEWABLE FUELS ASSOCIATION PAC - IRFA PAC

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB23.6427**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. KING FOR CONGRESS**

Mailing Address 116 N MAIN ST.  
PO BOX 400

City EARLY State IA Zip Code 50535

Purpose of Disbursement  
DONATION

Category/  
Type

Candidate Name  
KING FOR CONGRESS

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IA District: 04

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB23.6431**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. LOEBSACK FOR CONGRESS**

Mailing Address PO BOX 3013

City IOWA CITY State IA Zip Code 52244

Purpose of Disbursement  
DONATION

Category/  
Type

Candidate Name  
LOEBSACK FOR CONGRESS

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IA District: 02

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB23.6432**

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                             |                              |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <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)  
**ABSOLUTE ENERGY PAC**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. NATIONAL CORN GROWERS ASSOCIATION (NCGA)</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 31 / 2016                      |
| Mailing Address 20 F STREET NW<br>SUITE 600  |   | FEC Identification Number<br>C 000376343<br><b>Transaction ID : SB23.6430</b> |
| City WASHINGTON  | State DC  | Zip Code 20001  |
| Purpose of Disbursement<br>DONATION  | Category/Type<br>012  | Amount of Each Disbursement this Period<br>5000.00                            |
| Candidate Name<br><b>NATIONAL CORN GROWERS ASSOCIATION (NCGA)</b>  | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Memo Item <input type="checkbox"/>  |
| Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: District:  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. YOUNG FOR IOWA, INC.</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016                      |
| Mailing Address PO BOX 162   |  | FEC Identification Number<br>C 000545616<br><b>Transaction ID : SB23.6575</b> |
| City VAN METER   | State IA   | Zip Code 50261  |
| Purpose of Disbursement<br>DONATION  | Category/Type<br>012   | Amount of Each Disbursement this Period<br>500.00                             |
| Candidate Name<br><b>YOUNG FOR IOWA, INC.</b>  | Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Memo Item <input type="checkbox"/>  |
| Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | State: IA District: 03   |   |

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

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

5500.00

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

19500.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. AMANDA RAGAN FOR IOWA SENATE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 361 S PENN, 1D

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

City MASON CITY State IA Zip Code 50401

FEC Identification Number

Purpose of Disbursement  
DONATION

|                   |
|-------------------|
| 012               |
| Category/<br>Type |

|   |
|---|
| C                                       |
| Transaction ID : SB29.6436              |
| Amount of Each Disbursement this Period |
| 250.00                                  |

Candidate Name

**AMANDA RAGAN FOR IOWA SENATE**

|                |  |  |
|----------------|--|--|
| Office Sought: | <input type="checkbox"/> House             | Disbursement For: 2016   |
|                | <input checked="" type="checkbox"/> Senate | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |
|                | <input type="checkbox"/> President         | <input type="checkbox"/> Other (specify) ▼                                   |
| State: IA      | District: 07                               |  |

Memo Item

**B. BEARINGER FOR HOUSE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 500 7TH AVENUE SE

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

City OELWEIN State IA Zip Code 50662

FEC Identification Number

Purpose of Disbursement  
DONATION

|                   |
|-------------------|
| 012               |
| Category/<br>Type |

|   |
|---|
| C                                       |
| Transaction ID : SB29.6563              |
| Amount of Each Disbursement this Period |
| 500.00                                  |

Candidate Name

**BEARINGER FOR HOUSE**

|                |   |  |
|----------------|---|--|
| Office Sought: | <input checked="" type="checkbox"/> House | Disbursement For: 2016   |
|                | <input type="checkbox"/> Senate           | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |
|                | <input type="checkbox"/> President        | <input type="checkbox"/> Other (specify) ▼                                   |
| State: IA      | District: 64                              |  |

Memo Item

**C. CHAPMAN FOR SENATE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1206 LYNNE DRIVE

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

City ADEL State IA Zip Code 50003

FEC Identification Number

Purpose of Disbursement  
DONATION

|                   |
|-------------------|
| 012               |
| Category/<br>Type |

|   |
|---|
| C                                       |
| Transaction ID : SB29.6483              |
| Amount of Each Disbursement this Period |
| 500.00                                  |

Candidate Name

**CHAPMAN, JAKE, , ,**

|                |  |  |
|----------------|--|--|
| Office Sought: | <input type="checkbox"/> House             | Disbursement For: 2016   |
|                | <input checked="" type="checkbox"/> Senate | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |
|                | <input type="checkbox"/> President         | <input type="checkbox"/> Other (specify) ▼                                   |
| State: IA      | District: 10                               |  |

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

|         |
|---------|
| 1250.00 |
|---------|

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

|  |
|--|
|  |
|--|

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. CHARLIE MCCONKEY FOR STATE REPRESENTATIVE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 2222 AVENUE L

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

City COUNCIL BLUFFS State IA Zip Code 51501

FEC Identification Number

Purpose of Disbursement  
DONATION

|                   |
|-------------------|
| 012               |
| Category/<br>Type |

|   |
|---|
| C                                       |
| Transaction ID : SB29.6550              |
| Amount of Each Disbursement this Period |
| 250.00                                  |

Candidate Name  
**CHARLIE MCCONKEY FOR STATE REPRESENTATIVE**

|                |   |  |
|----------------|---|--|
| Office Sought: | <input checked="" type="checkbox"/> House | Disbursement For: 2016   |
|                | <input type="checkbox"/> Senate           | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |
|                | <input type="checkbox"/> President        | <input type="checkbox"/> Other (specify) ▼                                   |
| State: IA      | District: 15                              |  |

Memo Item

**B. CHAZ ALLEN 4 SENATE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1438 N 7TH AVENUE E

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

City NEWTON State IA Zip Code 50208

FEC Identification Number

Purpose of Disbursement  
DONATION

|                   |
|-------------------|
| 012               |
| Category/<br>Type |

|   |
|---|
| C                                       |
| Transaction ID : SB29.6444              |
| Amount of Each Disbursement this Period |
| 250.00                                  |

Candidate Name  
**CHAZ ALLEN 4 SENATE**

|                |  |  |
|----------------|--|--|
| Office Sought: | <input type="checkbox"/> House             | Disbursement For: 2016   |
|                | <input checked="" type="checkbox"/> Senate | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |
|                | <input type="checkbox"/> President         | <input type="checkbox"/> Other (specify) ▼                                   |
| State: IA      | District: 15                               |  |

Memo Item

**C. CITIZENS FOR GRONSTAL**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 220 BENNETT AVENUE

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

City COUNCIL BLUFFS State IA Zip Code 51503

FEC Identification Number

Purpose of Disbursement  
DONATION

|                   |
|-------------------|
| 012               |
| Category/<br>Type |

|   |
|---|
| C                                       |
| Transaction ID : SB29.6434              |
| Amount of Each Disbursement this Period |
| 2750.00                                 |

Candidate Name  
**CITIZENS FOR GRONSTAL**

|                |  |  |
|----------------|--|--|
| Office Sought: | <input type="checkbox"/> House             | Disbursement For: 2016   |
|                | <input checked="" type="checkbox"/> Senate | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |
|                | <input type="checkbox"/> President         | <input type="checkbox"/> Other (specify) ▼                                   |
| State: IA      | District: 50                               |  |

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶

|         |
|---------|
| 3250.00 |
|---------|

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

|  |
|--|
|  |
|--|

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

Full Name (Last, First, Middle Initial)  
**A. CITIZENS FOR MOMMSEN**

Date of Disbursement: MM / DD / YYYY  
08 / 29 / 2016

Mailing Address 2308 15TH STREET CT

City DEWITT State IA Zip Code 52742

Purpose of Disbursement DONATION Category/Type 012

Candidate Name  
**CITIZENS FOR MOMMSEN**

Office Sought:  House  Senate  President Disbursement For: 2016  
 Primary  General  Other (specify) ▼

State: IA District: 97

FEC Identification Number  
C  
**Transaction ID : SB29.6503**

Amount of Each Disbursement this Period  
1000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. CITIZENS FOR PAT GRASSLEY**

Date of Disbursement: MM / DD / YYYY  
08 / 29 / 2016

Mailing Address 30601 DEER TRAIL DRIVE

City NEW HARTFORD State IA Zip Code 50660

Purpose of Disbursement DONATION Category/Type 012

Candidate Name  
**CITIZENS FOR PAT GRASSLEY**

Office Sought:  House  Senate  President Disbursement For: 2016  
 Primary  General  Other (specify) ▼

State: IA District: 50

FEC Identification Number  
C  
**Transaction ID : SB29.6492**

Amount of Each Disbursement this Period  
250.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. CITIZENS FOR ROB HOGG**

Date of Disbursement: MM / DD / YYYY  
08 / 29 / 2016

Mailing Address 2750 OTIS ROAD SE

City CEDAR RAPIDS State IA Zip Code 52403

Purpose of Disbursement DONATION Category/Type 012

Candidate Name  
**CITIZENS FOR ROB HOGG**

Office Sought:  House  Senate  President Disbursement For: 2016  
 Primary  General  Other (specify) ▼

State: IA District: 19

FEC Identification Number  
C  
**Transaction ID : SB29.6438**

Amount of Each Disbursement this Period  
1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2250.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CITIZENS FOR SCHOENJAHN</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016                       |
| Mailing Address 221 PARK AVENUE  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6459</b> |
| City<br>ARLINGTON  | State<br>IA  | Zip Code<br>50606-0132   |
| Purpose of Disbursement<br>DONATION  |  | Category/<br>Type<br>012   |
| Candidate Name<br><b>CITIZENS FOR SCHOENJAHN</b>   |  | Amount of Each Disbursement this Period<br>500.00                              |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item   |
| State: IA  | District: 32   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CITIZENS FOR SEXTON</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016                       |
| Mailing Address 2202 OGDEN AVENUE  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6526</b> |
| City<br>ROCKWELL CITY  | State<br>IA  | Zip Code<br>50579  |
| Purpose of Disbursement<br>DONATION  |  | Category/<br>Type<br>012   |
| Candidate Name<br><b>CITIZENS FOR SEXTON</b>   |  | Amount of Each Disbursement this Period<br>250.00                              |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item   |
| State: IA  | District: 10   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CITIZENS FOR SHARON STECKMAN</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016                       |
| Mailing Address 1038 15TH STREET NE  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6541</b> |
| City<br>MASON CITY   | State<br>IA  | Zip Code<br>50401  |
| Purpose of Disbursement<br>DONATION  |  | Category/<br>Type<br>012   |
| Candidate Name<br><b>CITIZENS FOR SHARON STECKMAN</b>  |  | Amount of Each Disbursement this Period<br>750.00                              |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item   |
| State: IA  | District: 13   |  |

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1500.00

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CITIZENS FOR SIECK</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016                       |
| Mailing Address 1710 TIMBER LN   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6495</b> |
| City<br>GLENWOOD   | State<br>IA  | Zip Code<br>51534  |
| Purpose of Disbursement<br>DONATION  |  | Category/Type<br>012   |
| Candidate Name<br><b>CITIZENS FOR SIECK</b>  |  | Amount of Each Disbursement this Period<br>[REDACTED] 750.00                   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item   |
| State: IA  | District: 23   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CITIZENS TO ELECT BILL DOTZLER</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016                       |
| Mailing Address 2837 CEDAR TERRACE DRIVE   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6458</b> |
| City<br>WATERLOO   | State<br>IA  | Zip Code<br>50702  |
| Purpose of Disbursement<br>DONATION  |  | Category/Type<br>012   |
| Candidate Name<br><b>CITIZENS TO ELECT BILL DOTZLER</b>  |  | Amount of Each Disbursement this Period<br>[REDACTED] 250.00                   |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item   |
| State: IA  | District: 11   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. COHOON FOR REPRESENTATIVE</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016                       |
| Mailing Address 8151 138TH STREET  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6542</b> |
| City<br>BURLINGTON   | State<br>IA  | Zip Code<br>52601  |
| Purpose of Disbursement<br>DONATION  |  | Category/Type<br>012   |
| Candidate Name<br><b>COHOON FOR REPRESENTATIVE</b>   |  | Amount of Each Disbursement this Period<br>[REDACTED] 500.00                   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item   |
| State: IA  | District: 87   |  |

|  |                    |
|--|--------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 1500.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. COMMITTEE TO ELECT ART STAED</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016                       |
| Mailing Address 2905 ALLEGHANY DRIVE, NE  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6559</b> |
| City<br>CEDAR RAPIDS  | State<br>IA  | Zip Code<br>52402  |
| Purpose of Disbursement<br>DONATION   | Category/Type<br>012   |  |
| Candidate Name<br><b>COMMITTEE TO ELECT ART STAED</b>   | Amount of Each Disbursement this Period<br>500.00  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item   |
| State: District:  |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. COMMITTEE TO ELECT CHRIS BRASE</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016                       |
| Mailing Address 972 NEWELL AVENUE  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6439</b> |
| City<br>MUSCATINE  | State<br>IA  | Zip Code<br>52761  |
| Purpose of Disbursement<br>DONATION  | Category/Type<br>012   |  |
| Candidate Name<br><b>COMMITTEE TO ELECT CHRIS BRASE</b>  | Amount of Each Disbursement this Period<br>500.00  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item   |
| State: IA District: 46   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. COMMITTEE TO ELECT HELEN MILLER</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016                       |
| Mailing Address 1936 15TH AVENUE NORTH   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6553</b> |
| City<br>FT. DODGE  | State<br>IA  | Zip Code<br>50501  |
| Purpose of Disbursement<br>DONATION  | Category/Type<br>012   |  |
| Candidate Name<br><b>COMMITTEE TO ELECT HELEN MILLER</b>   | Amount of Each Disbursement this Period<br>250.00  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item   |
| State: IA District: 09   |  |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 1250.00 |
| <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)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. COMMITTEE TO ELECT MATT MCCOY**

Full Name (Last, First, Middle Initial)

Mailing Address 110 35TH STREET

City DES MOINES State IA Zip Code 50312

Purpose of Disbursement  
DONATION

Category/  
Type

Candidate Name  
**COMMITTEE TO ELECT MATT MCCOY**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IA District: 31

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.6446**  
Amount of Each Disbursement this Period

Memo Item

**B. COMMITTEE TO ELECT ROBERT E. DVORSKY**

Full Name (Last, First, Middle Initial)

Mailing Address 450 3RD AVENUE #3

City CORALVILLE State IA Zip Code 52241

Purpose of Disbursement  
DONATION

Category/  
Type

Candidate Name  
**COMMITTEE TO ELECT ROBERT E. DVORSKY**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IA District: 37

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.6447**  
Amount of Each Disbursement this Period

Memo Item

**C. COSTELLO FOR IOWA SENATE**

Full Name (Last, First, Middle Initial)

Mailing Address 37265 RAINS AVENUE

City IMOGENE State IA Zip Code 51645

Purpose of Disbursement  
DONATION

Category/  
Type

Candidate Name  
**COSTELLO FOR IOWA SENATE**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IA District: 23

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.6472**  
Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CURT HANSON FOR STATE REPRESENTATIVE</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016   |
| Mailing Address 801 N COURT STREET  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6549</b>   |
| City<br>FAIRFIELD   | State<br>IA  | Zip Code<br>52556  |
| Purpose of Disbursement<br>DONATION   | Category/<br>Type<br>012   | Amount of Each Disbursement this Period<br>500.00  |
| Candidate Name<br><b>CURT HANSON FOR STATE REPRESENTATIVE</b>                             | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: IA   | District: 90   | <input type="checkbox"/> Memo Item   |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. DAN ZUMBACH FOR SENATE</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016   |
| Mailing Address 2618 140TH AVENUE   |   | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6464</b>   |
| City<br>RYAN  | State<br>IA   | Zip Code<br>52330  |
| Purpose of Disbursement<br>DONATION   | Category/<br>Type<br>012  | Amount of Each Disbursement this Period<br>250.00  |
| Candidate Name<br><b>DAN ZUMBACH FOR SENATE</b>                             | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State:  | District:   | <input type="checkbox"/> Memo Item   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. DEYOE FOR HOUSE</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016   |
| Mailing Address 911 SHAGBARK DRIVE                                   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6508</b>   |
| City<br>NEVADA   | State<br>IA  | Zip Code<br>50201  |
| Purpose of Disbursement<br>DONATION                                  | Category/<br>Type<br>012   | Amount of Each Disbursement this Period<br>250.00  |
| Candidate Name<br><b>DEYOE FOR HOUSE</b>                             | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: IA  | District: 49   | <input type="checkbox"/> Memo Item   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 1000.00 |
| <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)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. DOLECHECK FOR REPRESENTATIVE**

Full Name (Last, First, Middle Initial)

Mailing Address 703 N FILMORE

City MT. AYR State IA Zip Code 50854

Purpose of Disbursement  
DONATION

Category/  
Type

Candidate Name  
**DOLECHECK FOR REPRESENTATIVE**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IA District: 96

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.6511**  
Amount of Each Disbursement this Period

Memo Item

**B. FORBES FOR IOWA HOUSE**

Full Name (Last, First, Middle Initial)

Mailing Address 12816 CARDINAL LANE

City UBANDALE State IA Zip Code 50323

Purpose of Disbursement  
DONATION

Category/  
Type

Candidate Name  
**FORBES FOR IOWA HOUSE**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IA District: 40

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.6564**  
Amount of Each Disbursement this Period

Memo Item

**C. FRIENDS FOR BREITBACH**

Full Name (Last, First, Middle Initial)

Mailing Address 301 W MISSION STREET

City STRAWBERRY POINT State IA Zip Code 52076

Purpose of Disbursement  
DONATION

Category/  
Type

Candidate Name  
**FRIENDS FOR BREITBACH**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IA District: 28

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.6463**  
Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. FRIENDS FOR DIX</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016   |
| Mailing Address 317 S WALNUT   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6462</b>   |
| City<br>SHELL ROCK   | State<br>IA  | Zip Code<br>50670  |
| Purpose of Disbursement<br>DONATION                                  | Category/<br>Type<br>012   | Amount of Each Disbursement this Period<br>1000.00   |
| Candidate Name<br><b>FRIENDS FOR DIX</b>                             | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: IA  | District: 09   | <input type="checkbox"/> Memo Item   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. FRIENDS FOR LANDON</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016   |
| Mailing Address 2905 NE TRILEIN DRIVE                                   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6516</b>   |
| City<br>ANKENY  | State<br>IA  | Zip Code<br>50021  |
| Purpose of Disbursement<br>DONATION                                     | Category/<br>Type<br>012   | Amount of Each Disbursement this Period<br>500.00  |
| Candidate Name<br><b>FRIENDS FOR LANDON</b>                             | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: IA   | District: 37   | <input type="checkbox"/> Memo Item   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. FRIENDS FOR ZACH NUNN</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016   |
| Mailing Address PO BOX 105   |   | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6501</b>   |
| City<br>ALTOONA  | State<br>IA   | Zip Code<br>50009  |
| Purpose of Disbursement<br>DONATION  | Category/<br>Type<br>012  | Amount of Each Disbursement this Period<br>1000.00   |
| Candidate Name<br><b>FRIENDS FOR ZACH NUNN</b>                             | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State:   | District:   | <input type="checkbox"/> Memo Item   |

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

2500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. FRIENDS OF ABBY FINKENAUER</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016   |
| Mailing Address 1040 RUSH STREET   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6545</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 500.00 |
| City<br>DUBUQUE  | State<br>IA  | Zip Code<br>52003  |
| Purpose of Disbursement<br>DONATION  |  | Category/<br>Type<br>012   |
| Candidate Name<br><b>FRIENDS OF ABBY FINKENAUER</b>  |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: IA  | District: 99   | <input type="checkbox"/> Memo Item   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. FRIENDS OF JIM LYKAM</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016   |
| Mailing Address 2906 W 35TH STREET   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6534</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 500.00 |
| City<br>DAVENPORT  | State<br>IA  | Zip Code<br>52806  |
| Purpose of Disbursement<br>DONATION  |  | Category/<br>Type<br>012   |
| Candidate Name<br><b>FRIENDS OF JIM LYKAM</b>  |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: IA  | District: 85   | <input type="checkbox"/> Memo Item   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. FRIENDS OF TOD BOWMAN</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016   |
| Mailing Address 812 GRANT STREET   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6445</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 250.00 |
| City<br>MAQUOKETA  | State<br>IA  | Zip Code<br>52060  |
| Purpose of Disbursement<br>DONATION  |  | Category/<br>Type<br>012   |
| Candidate Name<br><b>FRIENDS OF TOD BOWMAN</b>   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: IA  | District: 29   | <input type="checkbox"/> Memo Item   |

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 1250.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

Full Name (Last, First, Middle Initial)  
**A. FRIENDS OF WHITVER**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

Mailing Address 4019 NE BELLAGIO CIRCLE

FEC Identification Number

C [REDACTED]

Transaction ID : **SB29.6480**

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

City ANKENY State IA Zip Code 50023

Purpose of Disbursement  
DONATION

012  
Category/  
Type

Candidate Name  
**FRIENDS OF WHITVER**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IA District: 19

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

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

Mailing Address 14519 490TH STREET

FEC Identification Number

C [REDACTED]

Transaction ID : **SB29.6512**

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

City SCARVILLE State IA Zip Code 50473

Purpose of Disbursement  
DONATION

012  
Category/  
Type

Candidate Name  
**GASSMAN FOR HOUSE**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IA District: 07

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

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

Mailing Address 1770 TAFT AVENUE

FEC Identification Number

C [REDACTED]

Transaction ID : **SB29.6473**

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

City KLEMME State IA Zip Code 50449

Purpose of Disbursement  
DONATION

012  
Category/  
Type

Candidate Name  
**GUTH FOR SENATE**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IA District: 04

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 1500.00

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. HAGENOW FOR IOWA HOUSE</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016   |
| Mailing Address 1915 69TH STREET   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6489</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 500.00 |
| City<br>WINDSOR HEIGHTS  | State<br>IA  | Zip Code<br>50324  |
| Purpose of Disbursement<br>DONATION  |  | Category/<br>Type<br>012   |
| Candidate Name<br><b>HAGENOW FOR IOWA HOUSE</b>  |  | Memo Item <input type="checkbox"/>   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: IA  | District: 43   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. HALL FOR IOWA</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016   |
| Mailing Address PO BOX 4579  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6548</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 250.00 |
| City<br>SIOUX CITY   | State<br>IA  | Zip Code<br>51104  |
| Purpose of Disbursement<br>DONATION  |  | Category/<br>Type<br>012   |
| Candidate Name<br><b>HALL FOR IOWA</b>   |  | Memo Item <input type="checkbox"/>   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: IA  | District: 02   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. HEIN FOR STATE HOUSE</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016   |
| Mailing Address 17358 COUNTY ROAD E-16   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6491</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 500.00 |
| City<br>MONTICELLO   | State<br>IA  | Zip Code<br>52310  |
| Purpose of Disbursement<br>DONATION  |  | Category/<br>Type<br>012   |
| Candidate Name<br><b>HEIN FOR STATE HOUSE</b>  |  | Memo Item <input type="checkbox"/>   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: IA  | District: 31   |  |

**SUBTOTAL** of Disbursements This Page (optional).....▶

[REDACTED] 1250.00

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. HOLZ FOR HOUSE DISTRICT 5 COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address 17585 LAKE AVENUE

City LE MARS State IA Zip Code 51031

Purpose of Disbursement DONATION

Candidate Name **HOLZ FOR HOUSE DISTRICT 5 COMMITTEE**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: IA District: 05

Date of Disbursement: 08 / 29 / 2016

FEC Identification Number: C

Transaction ID : **SB29.6498**

Amount of Each Disbursement this Period: 700.00

Memo Item

**B. IOWANS FOR KIRSTEN RUNNING-MARQUARDT**

Full Name (Last, First, Middle Initial)

Mailing Address 3515 FIELD STONE PLACE SW

City CEDAR RAPIDS State IA Zip Code 52404

Purpose of Disbursement DONATION

Candidate Name **IOWANS FOR KIRSTEN RUNNING-MARQUARDT**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: IA District: 69

Date of Disbursement: 08 / 29 / 2016

FEC Identification Number: C

Transaction ID : **SB29.6556**

Amount of Each Disbursement this Period: 500.00

Memo Item

**C. IOWANS FOR PRICHARD**

Full Name (Last, First, Middle Initial)

Mailing Address 107 FERGUSON STREET

City IOWA State IA Zip Code 50616

Purpose of Disbursement DONATION

Candidate Name **IOWANS FOR PRICHARD**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: IA District: 52

Date of Disbursement: 08 / 29 / 2016

FEC Identification Number: C

Transaction ID : **SB29.6540**

Amount of Each Disbursement this Period: 250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1450.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

Full Name (Last, First, Middle Initial)

**A. ISENHART CAMPAIGN FOR THE COMMON GOOD**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

Mailing Address 1665 KAUFMANN AVENUE

FEC Identification Number

C [REDACTED]

**Transaction ID : SB29.6538**

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement  
DONATION

012  
Category/  
Type

Candidate Name  
**ISENHART CAMPAIGN FOR THE COMMON GOOD**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼

State: IA District: 27

Full Name (Last, First, Middle Initial)

**B. JACOBY FOR HOUSE**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

Mailing Address 2308 NORTHRIDGE DRIVE

FEC Identification Number

C [REDACTED]

**Transaction ID : SB29.6533**

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

City CORALVILLE State IA Zip Code 52241

Purpose of Disbursement  
DONATION

012  
Category/  
Type

Candidate Name  
**JACOBY FOR HOUSE**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼

State: IA District: 30

Full Name (Last, First, Middle Initial)

**C. JOE BOLKCOME FOR IOWA SENATE**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

Mailing Address 728 2ND AVENUE

FEC Identification Number

C [REDACTED]

**Transaction ID : SB29.6437**

Amount of Each Disbursement this Period

[REDACTED] 750.00

Memo Item

City IOWA CITY State IA Zip Code 52245

Purpose of Disbursement  
DONATION

012  
Category/  
Type

Candidate Name  
**JOE BOLKCOME FOR IOWA SENATE**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼

State: IA District: 39

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 1750.00

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. KAPUCIAN FOR STATE SENATE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1275 69TH STREET

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

City KEYSTONE State IA Zip Code 52249

FEC Identification Number

Purpose of Disbursement  
DONATION

|                   |
|-------------------|
| 012               |
| Category/<br>Type |

|   |
|---|
| C |
|---|

Transaction ID : SB29.6474

Amount of Each Disbursement this Period

Candidate Name  
**KAPUCIAN FOR STATE SENATE**

|        |
|--------|
| 500.00 |
|--------|

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IA District: 20

Memo Item

**B. KAUFMANN FOR STATE HOUSE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1527 330TH STREET

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

City WILTON State IA Zip Code 52778

FEC Identification Number

Purpose of Disbursement  
DONATION

|                   |
|-------------------|
| 012               |
| Category/<br>Type |

|   |
|---|
| C |
|---|

Transaction ID : SB29.6502

Amount of Each Disbursement this Period

Candidate Name  
**KAUFMANN FOR STATE HOUSE**

|         |
|---------|
| 1000.00 |
|---------|

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IA District: 73

Memo Item

**C. KEARNS FOR STATE REPRESENTATIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 402 HICKORY TERRACE

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

City KEOKUK State IA Zip Code 52632

FEC Identification Number

Purpose of Disbursement  
DONATION

|                   |
|-------------------|
| 012               |
| Category/<br>Type |

|   |
|---|
| C |
|---|

Transaction ID : SB29.6535

Amount of Each Disbursement this Period

Candidate Name  
**KEARNS FOR STATE REPRESENTATIVE COMMITTEE**

|        |
|--------|
| 500.00 |
|--------|

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IA District: 83

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶

|         |
|---------|
| 2000.00 |
|---------|

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

|  |
|--|
|  |
|--|



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. KEVIN KINNEY FOR STATE SENATE</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016   |
| Mailing Address 4321 CALKINS AVENUE SW   |   | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6450</b>   |
| City<br>OXFORD   | State<br>IA   | Zip Code<br>52322  |
| Purpose of Disbursement<br>DONATION  | Category/<br>Type<br>012  | Amount of Each Disbursement this Period<br>[REDACTED] 250.00   |
| Candidate Name<br><b>KEVIN KINNEY FOR STATE SENATE</b>                             | Office Sought:<br><input checked="" type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: ID District: 39   | <input type="checkbox"/> Memo Item  |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. KRAAYENBRINK FOR IOWA SENATE</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016   |
| Mailing Address 1561 NATIONAL AVENUE  |   | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6468</b>   |
| City<br>FORT DODGE  | State<br>IA   | Zip Code<br>50501  |
| Purpose of Disbursement<br>DONATION   | Category/<br>Type<br>012  | Amount of Each Disbursement this Period<br>[REDACTED] 250.00   |
| Candidate Name<br><b>KRAAYENBRINK FOR IOWA SENATE</b>                             | Office Sought:<br><input checked="" type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: IA District: 05  | <input type="checkbox"/> Memo Item  |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. MARK SEGBART FOR SENATE</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016   |
| Mailing Address 1820 350TH STREET  |   | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6478</b>   |
| City<br>VAIL   | State<br>IA   | Zip Code<br>51465  |
| Purpose of Disbursement<br>DONATION  | Category/<br>Type<br>012  | Amount of Each Disbursement this Period<br>[REDACTED] 400.00   |
| Candidate Name<br><b>MARK SEGBART FOR SENATE</b>                             | Office Sought:<br><input checked="" type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: IA District: 06   | <input type="checkbox"/> Memo Item  |  |

|  |                   |
|--|-------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 900.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]        |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. MARK SMITH FOR IOWA HOUSE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 816 ROBERTS TERRACE

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

City MARSHALLTOWN State IA Zip Code 50158

FEC Identification Number

Purpose of Disbursement  
DONATION

|                   |
|-------------------|
| 012               |
| Category/<br>Type |

|   |
|---|
| C |
|---|

Transaction ID : SB29.6532

Amount of Each Disbursement this Period

Candidate Name  
**MARK SMITH FOR IOWA HOUSE**

|        |
|--------|
| 750.00 |
|--------|

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IA District: 71

Memo Item

**B. MARY WOLFE CAMPAIGN**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 337 4TH AVENUE SOUTH

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

City CLINTON State IA Zip Code 52732

FEC Identification Number

Purpose of Disbursement  
DONATION

|                   |
|-------------------|
| 012               |
| Category/<br>Type |

|   |
|---|
| C |
|---|

Transaction ID : SB29.6560

Amount of Each Disbursement this Period

Candidate Name  
**MARY WOLFE CAMPAIGN**

|        |
|--------|
| 500.00 |
|--------|

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IA District: 98

Memo Item

**C. MATHIS FOR STATE SENATE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1725 MACKENZIE DRIVE

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

City CEDAR RAPIDS State IA Zip Code 52411

FEC Identification Number

Purpose of Disbursement  
DONATION

|                   |
|-------------------|
| 012               |
| Category/<br>Type |

|   |
|---|
| C |
|---|

Transaction ID : SB29.6452

Amount of Each Disbursement this Period

Candidate Name  
**MATHIS FOR STATE SENATE**

|        |
|--------|
| 500.00 |
|--------|

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IA District: 34

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶

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

|         |
|---------|
| 1750.00 |
|---------|

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. MAXWELL FOR STATE HOUSE</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016 |
| Mailing Address 2171 540TH AVENUE   |  | FEC Identification Number<br>C [REDACTED]                |
| City<br>GIBSON  | State<br>IA  | Zip Code<br>50112  |
| Purpose of Disbursement<br>DONATION   | Category/<br>Type<br>012   | Transaction ID : <b>SB29.6517</b>                        |
| Candidate Name<br><b>MAXWELL FOR STATE HOUSE</b>  | Disbursement For: 2016   | Amount of Each Disbursement this Period<br>250.00        |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item                       |
| State: IA District: 76  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MOORE FOR STATE REPRESENTATIVE</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016 |
| Mailing Address BOX 224, 600 MILLS STREET   |  | FEC Identification Number<br>C [REDACTED]                |
| City<br>GRISWOLD  | State<br>IA  | Zip Code<br>51535  |
| Purpose of Disbursement<br>DONATION   | Category/<br>Type<br>012   | Transaction ID : <b>SB29.6520</b>                        |
| Candidate Name<br><b>MOORE FOR STATE REPRESENTATIVE</b>   | Disbursement For: 2016   | Amount of Each Disbursement this Period<br>250.00        |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item                       |
| State: IA District: 21  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. PAUSTIAN FOR STATE HOUSE, ROSS, , ,</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016 |
| Mailing Address 389 WEST PARKVIEW DRIVE   |  | FEC Identification Number<br>C [REDACTED]                |
| City<br>WALCOTT   | State<br>IA  | Zip Code<br>52773  |
| Purpose of Disbursement<br>DONATION   | Category/<br>Type<br>012   | Transaction ID : <b>SB29.6523</b>                        |
| Candidate Name<br><b>PAUSTIAN FOR STATE HOUSE, ROSS, , ,</b>  | Disbursement For: 2016   | Amount of Each Disbursement this Period<br>500.00        |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item                       |
| State: IA District:   |  |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 1000.00 |
| <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)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. People for Pam Jochum**

Full Name (Last, First, Middle Initial)  
Mailing Address 2368 Jackson Street

City Dubuque State IA Zip Code 52001

Purpose of Disbursement DONATION

Candidate Name **People for Pam Jochum**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: IA District: 50

Date of Disbursement: 08 / 29 / 2016

FEC Identification Number: C

Transaction ID : **SB29.6435**

Amount of Each Disbursement this Period: 250.00

Memo Item

**B. RE-ELECTION OF WALLY HORN COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address 101 STONEY POINT ROAD SW

City CEDAR RAPIDS State IA Zip Code 52404

Purpose of Disbursement DONATION

Candidate Name **RE-ELECTION OF WALLY HORN COMMITTEE**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: IA District: 35

Date of Disbursement: 08 / 29 / 2016

FEC Identification Number: C

Transaction ID : **SB29.6455**

Amount of Each Disbursement this Period: 500.00

Memo Item

**C. ROZENBOOM FOR SENATE**

Full Name (Last, First, Middle Initial)  
Mailing Address 2200 OXFORD AVENUE

City OSKALOOSA State IA Zip Code 52577

Purpose of Disbursement DONATION

Candidate Name **ROZENBOOM FOR SENATE**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: IA District: 40

Date of Disbursement: 08 / 29 / 2016

FEC Identification Number: C

Transaction ID : **SB29.6484**

Amount of Each Disbursement this Period: 500.00

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. RUFF FOR IOWA HOUSE DIST 56**

Full Name (Last, First, Middle Initial)

Mailing Address 13331 JADE AVENUE

City MCGREGOR State IA Zip Code 52157

Purpose of Disbursement  
DONATION

012  
Category/  
Type

Candidate Name  
**RUFF FOR IOWA HOUSE DIST 56**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IA District: 56

Date of Disbursement  
MM / DD / YYYY  
08 / 29 / 2016

FEC Identification Number  
C  
Transaction ID : **SB29.6555**  
Amount of Each Disbursement this Period  
500.00

Memo Item

**B. SCHNEIDER FOR STATE SENATE**

Full Name (Last, First, Middle Initial)

Mailing Address 7887 CODY DRIVE

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement  
DONATION

012  
Category/  
Type

Candidate Name  
**SCHNEIDER FOR STATE SENATE**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IA District: 22

Date of Disbursement  
MM / DD / YYYY  
08 / 29 / 2016

FEC Identification Number  
C  
Transaction ID : **SB29.6475**  
Amount of Each Disbursement this Period  
500.00

Memo Item

**C. SCOTT OURTH FOR STATE REPRESENTATIVE**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 395

City INDIANOLA State IA Zip Code 50125

Purpose of Disbursement  
DONATION

012  
Category/  
Type

Candidate Name  
**SCOTT OURTH FOR STATE REPRESENTATIVE**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IA District: 74

Date of Disbursement  
MM / DD / YYYY  
08 / 29 / 2016

FEC Identification Number  
C  
Transaction ID : **SB29.6539**  
Amount of Each Disbursement this Period  
500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. SINCLAIR FOR IOWA</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016   |
| Mailing Address 1255 KING ROAD   |   | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6479</b>   |
| City<br>ALLERTON   | State<br>IA   | Zip Code<br>50008  |
| Purpose of Disbursement<br>DONATION                                    | Category/<br>Type<br>012  | Amount of Each Disbursement this Period<br>500.00  |
| Candidate Name<br><b>SINCLAIR FOR IOWA</b>                             | Office Sought:<br><input checked="" type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: IA  | District: 14  | <input type="checkbox"/> Memo Item   |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. SODDERS FOR STATE SENATE</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016   |
| Mailing Address 202 5TH AVENUE SE   |   | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6451</b>   |
| City<br>STATE CENTER  | State<br>IA   | Zip Code<br>50247  |
| Purpose of Disbursement<br>DONATION   | Category/<br>Type<br>012  | Amount of Each Disbursement this Period<br>250.00  |
| Candidate Name<br><b>SODDERS FOR STATE SENATE</b>                             | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State:  | District:   | <input type="checkbox"/> Memo Item   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. TAYLOR FOR REPRESENTATIVE</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016   |
| Mailing Address 1416 A AVENUE NW   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : SB29.6565</b>   |
| City<br>CEDAR RAPIDS   | State<br>IA  | Zip Code<br>52405-4834   |
| Purpose of Disbursement<br>DONATION  | Category/<br>Type<br>012   | Amount of Each Disbursement this Period<br>500.00  |
| Candidate Name<br><b>TAYLOR FOR REPRESENTATIVE</b>                             | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: IA  | District: 70   | <input type="checkbox"/> Memo Item   |

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1250.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. TERRY BAXTER FOR IOWA HOUSE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 2395 290TH STREET

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

City GARNER State IA Zip Code 50438

FEC Identification Number

Purpose of Disbursement  
DONATION

|                   |
|-------------------|
| C                 |
| 012               |
| Category/<br>Type |

|   |
|---|
| Transaction ID : SB29.6505              |
| Amount of Each Disbursement this Period |
| 250.00                                  |

Candidate Name

**TERRY BAXTER FOR IOWA HOUSE**

|   |  |
|---|--|
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: IA District: 08  |  |

Memo Item

**B. TOM SHIPLEY FOR IOWA**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 2425 BIRCH AVENUE

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

City NODAWAY State IA Zip Code 50857

FEC Identification Number

Purpose of Disbursement  
DONATION

|                   |
|-------------------|
| C                 |
| 012               |
| Category/<br>Type |

|   |
|---|
| Transaction ID : SB29.6465              |
| Amount of Each Disbursement this Period |
| 250.00                                  |

Candidate Name

**TOM SHIPLEY FOR IOWA**

|   |  |
|---|--|
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: IA District: 11  |  |

Memo Item

**C. UPMEYER FOR HOUSE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1811 N 8TH STREET

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 29    |   | 2016      |

City CLEAR LAKE State IA Zip Code 50428

FEC Identification Number

Purpose of Disbursement  
DONATION

|                   |
|-------------------|
| C                 |
| 012               |
| Category/<br>Type |

|   |
|---|
| Transaction ID : SB29.6488              |
| Amount of Each Disbursement this Period |
| 2250.00                                 |

Candidate Name

**UPMEYER FOR HOUSE**

|   |  |
|---|--|
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: IA District: 12  |  |

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶

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

|         |
|---------|
| 2750.00 |
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

**A. VOTE BLOOMINGDALE**

Full Name (Last, First, Middle Initial)  
Mailing Address 501 2ND AVENUE NORTH

City NORTHWOOD State IA Zip Code 50459

Purpose of Disbursement DONATION

Candidate Name **VOTE BLOOMINGDALE**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: IA District: 51

Date of Disbursement: 08 / 29 / 2016

FEC Identification Number: C

Transaction ID : **SB29.6571**

Amount of Each Disbursement this Period: 500.00

Memo Item

**B. WALT ROGERS FOR IOWA**

Full Name (Last, First, Middle Initial)  
Mailing Address 4202 BRIARWOOD DRIVE

City CEDAR FALLS State IA Zip Code 50613

Purpose of Disbursement DONATION

Candidate Name **WALT ROGERS FOR IOWA**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: IA District: 60

Date of Disbursement: 08 / 29 / 2016

FEC Identification Number: C

Transaction ID : **SB29.6524**

Amount of Each Disbursement this Period: 500.00

Memo Item

**C. WAYLON BROWN FOR STATE SENATE**

Full Name (Last, First, Middle Initial)  
Mailing Address 109 SOUTH SUMMER STREET

City SAINT ANSGAR State IA Zip Code 50472

Purpose of Disbursement DONATION

Candidate Name **WAYLON BROWN FOR STATE SENATE**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: IA District: 26

Date of Disbursement: 08 / 29 / 2016

FEC Identification Number: C

Transaction ID : **SB29.6568**

Amount of Each Disbursement this Period: 250.00

Memo Item

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

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ABSOLUTE ENERGY PAC**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. WILHELM, MARY JO, , ,</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016                               |
| Mailing Address 414 NORTH ELM  |  |  |
| City<br>CRESCO   | State<br>IA  | Zip Code<br>52136  |
| Purpose of Disbursement<br>DONATION  | Category/Type<br>012   | FEC Identification Number<br>C   |
| Candidate Name<br><b>WILHELM, MARY JO, , ,</b>   | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID : <b>SB29.6443</b><br>Amount of Each Disbursement this Period<br>250.00 |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: IA District: 26   | <input type="checkbox"/> Memo Item   |

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| Full Name (Last, First, Middle Initial)<br><b>B. WILLS FOR IOWA</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 29 / 2016                               |
| Mailing Address 15732 TRADEWIND DRIVE  |  |  |
| City<br>SPIRIT LAKE  | State<br>IA  | Zip Code<br>51360  |
| Purpose of Disbursement<br>DONATION  | Category/Type<br>012   | FEC Identification Number<br>C   |
| Candidate Name<br><b>WILLS FOR IOWA</b>  | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID : <b>SB29.6504</b><br>Amount of Each Disbursement this Period<br>500.00 |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: IA District:  | <input type="checkbox"/> Memo Item   |

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

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 750.00   |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 38100.00 |