

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5  
Monica Vernon for Congress

ADDRESS (number and street) 326 23rd Street Drive SE  
 Check if different than previously reported. (ACC) Cedar Rapids IA 52403

2. **FEC IDENTIFICATION NUMBER** ▼ C C00545574 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A) CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT  
IA 01

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on 06 / 03 / 2014 in the State of IA  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on   /   /   in the State of  

5. Covering Period 04 / 01 / 2014 through 05 / 14 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer John Thomas Zaber  
Signature of Treasurer John Thomas Zaber [Electronically Filed] Date 05 / 22 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Monica Vernon for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y 05 / 14 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	16445.54	659974.35
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	16445.54	659724.35
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	269580.32	631931.83
(b) Total Offsets to Operating Expenditures (from Line 14).....	128.39	128.39
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	269451.93	631803.44
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	128170.91	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	100000.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Monica Vernon for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10738.54	412045.69
(ii) Unitemized.....	5651.00	76819.38
(iii) TOTAL of contributions from individuals ▶	16389.54	488865.07
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	270.00
(d) The Candidate.....	56.00	170839.28
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	16445.54	659974.35
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	100000.00	100000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	100000.00	100000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	128.39	128.39
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	116573.93	760102.74

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	269580.32	631931.83
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	250.00
(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 20(a), (b), and (c)).....	0.00	250.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	269580.32	632181.83

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	281177.30
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	116573.93
25. SUBTOTAL (add Line 23 and Line 24).....	397751.23
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	269580.32
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	128170.91

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Julie Allen**

Mailing Address 1811 N Cleveland Ave

City Chicago State IL Zip Code 60614-5205

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

Name of Employer Sidley Austin LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : VN8P2CJV452**

Amount of Each Receipt this Period  
 125.00

Amount of Each Receipt this Period  
 325.00

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

Mailing Address 2104 Plaza Del Fuentes

City Las Vegas State NV Zip Code 89102-3912

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

Name of Employer Arnold Olson Associates Occupation Nonprofit Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : VN8P2CMYX06**

Amount of Each Receipt this Period  
 100.00

Amount of Each Receipt this Period  
 1600.00

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

Mailing Address 151 Prospect Pl

City Brooklyn State NY Zip Code 11238-3801

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

Name of Employer None Occupation N/a

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 07 / 2014

**Transaction ID : VN8P2CJKKM0**

Amount of Each Receipt this Period  
 250.00

Amount of Each Receipt this Period  
 1250.00

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

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

475.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jacqueline Bryant**

Mailing Address 2135 Lincolnshire Dr SE

City Cedar Rapids	State IA	Zip Code 52403-1656
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : VN8P2CM0NG0**

Amount of Each Receipt this Period  
75.00

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

Mailing Address 4130 Oak Valley Dr

City Cedar Rapids	State IA	Zip Code 52411-7825
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FEC ID number of contributing federal political committee. **C**

Name of Employer N/A/RETIRED	Occupation RETIRED
---------------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 23 / 2014

**Transaction ID : VN8P2CKRZ84**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 152 Ashcombe SE

City Cedar Rapids	State IA	Zip Code 52403-1702
----------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 24 / 2014

**Transaction ID : VN8P2CKRZH5**

Amount of Each Receipt this Period  
100.00

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

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

425.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Janis Caldwell**

Mailing Address 152 Ashcombe SE

City Cedar Rapids State IA Zip Code 52403-1702

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 12 / 2014**

**Transaction ID : VN8P2CMWEN4**

Amount of Each Receipt this Period  
**75.00**

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

Mailing Address PO Box 177

City Sabula State IA Zip Code 52070-0177

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

Name of Employer None Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 08 / 2014**

**Transaction ID : VN8P2CMWEJ0**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 3600 Honey Hill Dr SE

City Cedar Rapids State IA Zip Code 52403-1920

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 23 / 2014**

**Transaction ID : VN8P2CKRZD3**

Amount of Each Receipt this Period  
**100.00**

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

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

**375.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joyce Frances Fleming**

Mailing Address 3270 Little Creek Rd NE

City Cedar Rapids State IA Zip Code 52402-7610

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 07 / 2014**

**Transaction ID : VN8P2CMH1F1**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address 525 E 14th St Apt 5B

City New York State NY Zip Code 10009-3007

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

Name of Employer Squadron for New York Occupation Deputy Finance Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 09 / 2014**

**Transaction ID : VN8P2CMEQK7**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 1834 Waterbury Ln

City Orange Park State FL Zip Code 32003-7749

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

Name of Employer self Occupation artist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 03 / 2014**

**Transaction ID : VN8P2CMEZ77**

Amount of Each Receipt this Period  
**200.00**

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

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

**1700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 60			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e
	12	13a	13b	14	15

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Margaret Haupt**

Mailing Address 721 Tiffany Dr NE

City Cedar Rapids State IA Zip Code 52402-4359

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

Name of Employer Coe College Occupation Professor of Political Science, Emerit

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 07 / 2014**

**Transaction ID : VN8P2CMH1G9**

Amount of Each Receipt this Period  
**400.00**

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

Mailing Address 229 Abbotsford Rd

City Cedar Rapids State IA Zip Code 52403-7003

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

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 06 / 2014**

**Transaction ID : VN8P2CMEZA1**

Amount of Each Receipt this Period  
**150.00**

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

Mailing Address 505 F15 Blvd

City West Amana State IA Zip Code 52203-8070

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

Name of Employer Community Volunteer Occupation Community Volunteer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 24 / 2014**

**Transaction ID : VN8P2CKRZK1**

Amount of Each Receipt this Period  
**150.00**

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

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

**700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Harriet H Hubbell**

Mailing Address 3721 Lincoln Place Dr

City	State	Zip Code
Des Moines	IA	50312-3013

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

Name of Employer	Occupation
Not Employed	retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		04		2014

**Transaction ID : VN8P2CKHAC6**

Amount of Each Receipt this Period

250.00
--------

**B.** Full Name (Last, First, Middle Initial)  
**James W Hubbell III**

Mailing Address 2854 Druid Hill Dr

City	State	Zip Code
Des Moines	IA	50315-1845

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

Name of Employer	Occupation
Retired	Chairman Hubbell Realty

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		07		2014

**Transaction ID : VN8P2CKHAD3**

Amount of Each Receipt this Period

500.00
--------

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

Mailing Address 144 Guildford SE

City	State	Zip Code
Cedar Rapids	IA	52403-1710

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

Name of Employer	Occupation
Retired	Retired Health Care Worker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		06		2014

**Transaction ID : VN8P2CMG0C8**

Amount of Each Receipt this Period

100.00
--------

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

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

850.00
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**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Julie Johnson**

Mailing Address 1762 Dover Ct

City State Zip Code  
Dubuque IA 52003-7892

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

Name of Employer Occupation  
Retired None

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2014

**Transaction ID : VN8P2CMHBJ7**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 257 38th Street Dr SE  
Apt 11

City State Zip Code  
Cedar Rapids IA 52403-1130

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

Name of Employer Occupation  
Monica Vernon for Congress Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1090.99

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 02 / 2014

**Transaction ID : VN8P2CMF446**

Amount of Each Receipt this Period  
74.34

\* In-Kind: Travel

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

Mailing Address 257 38th Street Dr SE  
Apt 11

City State Zip Code  
Cedar Rapids IA 52403-1130

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

Name of Employer Occupation  
Monica Vernon for Congress Campaign Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1115.99

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 13 / 2014

**Transaction ID : VN8P2CMVQ67**

Amount of Each Receipt this Period  
25.00

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

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

199.34

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 12 OF 60

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Julia Bernice Kottal**

Mailing Address 515 Fairview Dr SE

City Cedar Rapids State IA Zip Code 52403-2720

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

Name of Employer Self-Employed Occupation Graphic Designer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 28 / 2014**

**Transaction ID : VN8P2CM0NA3**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 2500 White Eagle Trl SE

City Cedar Rapids State IA Zip Code 52403-1548

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 03 / 2014**

**Transaction ID : VN8P2CMEZ10**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 2131 1st Ave SE  
 Apt 314

City Cedar Rapids State IA Zip Code 52402-6360

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **320.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 24 / 2014**

**Transaction ID : VN8P2CKRZG7**

Amount of Each Receipt this Period  
**50.00**

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

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

**550.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jean Lloyd-Jones**

Mailing Address 160 Oakridge Ave

City Iowa City State IA Zip Code 52246-2935

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

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2014

**Transaction ID : VN8P2CMEZ85**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 4515 Dexter St NW

City Washington State DC Zip Code 20007-1116

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

Name of Employer Dorsey & Whitney LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2014

**Transaction ID : VN8P2CKDJG3**

Amount of Each Receipt this Period  
**300.00**

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

Mailing Address 611 Rosedale Rd

City Cedar Rapids State IA Zip Code 52403-7031

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 24 / 2014

**Transaction ID : VN8P2CKRZE1**

Amount of Each Receipt this Period  
**200.00**

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

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ronald Clifford McGraw**

Mailing Address 6126 Rockwell Dr NE  
Apt 129

City Cedar Rapids State IA Zip Code 52402-4783

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : VN8P2CMWEM6**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 1927 Ridgeway Dr SE

City Cedar Rapids State IA Zip Code 52403-2752

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

Name of Employer Information Requested Occupation Information Requested  
Cedar Rapids Opera Theatre Director, Development and Operations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 13 / 2014

**Transaction ID : VN8P2CN6W65**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2400 Indian Hill Rd

City Cedar Rapids State IA Zip Code 52403-1526

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2014

**Transaction ID : VN8P2CMEZ93**

Amount of Each Receipt this Period  
50.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Darrel Arle Morf**

Mailing Address 1056 E Bertram Rd

City State Zip Code  
Mount Vernon IA 52314-9641

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

Name of Employer Occupation  
Simmons Perrine Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 01 / 2014

**Transaction ID : VN8P2CMEYZ6**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 1417 Chapin St NW  
Apt 302

City State Zip Code  
Washington DC 20009-8523

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

Name of Employer Occupation  
self consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**824.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 01 / 2014

**Transaction ID : VN8P2CM5SC5**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 1925 2nd Ave SE

City State Zip Code  
Cedar Rapids IA 52403

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

Name of Employer Occupation  
St. Lukes Hospital Guest Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**275.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : VN8P2CHCQ46**

Amount of Each Receipt this Period  
**25.00**

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

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

**525.00**

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 16 OF 60

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jane Oglesby**  
 Mailing Address 1925 2nd Ave SE  
 City Cedar Rapids State IA Zip Code 52403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer St. Lukes Hospital Occupation Guest Relations  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 01 / 2014**  
**Transaction ID : VN8P2CM90F7**  
 Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Scott Olson**  
 Mailing Address 6467 Quail Ridge Dr SW  
 City Cedar Rapids State IA Zip Code 52404-8048  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 07 / 2014**  
**Transaction ID : VN8P2CMH1J5**  
 Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Melissa Rae Osborn**  
 Mailing Address 1626 8th St NW  
 City Cedar Rapids State IA Zip Code 52405-1607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cedar Rapids Community Schools Occupation Teacher  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 24 / 2014**  
**Transaction ID : VN8P2CKRZA0**  
 Amount of Each Receipt this Period  
**25.00**

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

**150.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tami McGrath Pierson**

Mailing Address 331 23rd Street Dr SE

City	State	Zip Code
Cedar Rapids	IA	52403-1619

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

Name of Employer	Occupation
Vital Support Systems	VP of Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 07 / 2014**

**Transaction ID : VN8P2CMH1M1**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 2560 Country Club Pkwy SE

City	State	Zip Code
Cedar Rapids	IA	52403-1641

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

Name of Employer	Occupation
City of Cedar Rapids	City Councilwoman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**493.38**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 05 / 2014**

**Transaction ID : VN8P2CMCX79**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 2560 Country Club Pkwy SE

City	State	Zip Code
Cedar Rapids	IA	52403-1641

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

Name of Employer	Occupation
City of Cedar Rapids	City Councilwoman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**509.18**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 06 / 2014**

**Transaction ID : VN8P2CMF274**

Amount of Each Receipt this Period  
**15.80**

\* In-Kind: Travel

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

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

**165.80**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

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

Mailing Address 3469 Stone Ct

City Marion State IA Zip Code 52302-9435

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 30 / 2014**

**Transaction ID : VN8P2CM96E4**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 4320 Cottage Grove Pkwy SE

City Cedar Rapids State IA Zip Code 52403-2106

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 28 / 2014**

**Transaction ID : VN8P2CM0NH8**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 7105 Kent Dr NE

City Cedar Rapids State IA Zip Code 52402-6906

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 30 / 2014**

**Transaction ID : VN8P2CM96C8**

Amount of Each Receipt this Period  
**50.00**

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

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

**250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Danielle Rae Rings**

Mailing Address 3920 Highlands Ln SE

City	State	Zip Code
Cedar Rapids	IA	52403-2104

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

Name of Employer	Occupation
Mount Mercy University	Director of Annual Giving

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**775.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 12 / 2014**

**Transaction ID : VN8P2CMS615**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 2325 Blake Blvd SE

City	State	Zip Code
Cedar Rapids	IA	52403-2826

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

Name of Employer	Occupation
Simmons Perrine Moyer Bergman, PLC	Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 14 / 2014**

**Transaction ID : VN8P2CN6WE9**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 3683 Cottage Grove Ave SE

City	State	Zip Code
Cedar Rapids	IA	52403-1612

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

Name of Employer	Occupation
Information Requested	Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 24 / 2014**

**Transaction ID : VN8P2CKRZM9**

Amount of Each Receipt this Period  
**250.00**

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

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

**525.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

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

Mailing Address 100 16th Ave SW

City Cedar Rapids State IA Zip Code 52404-2955

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

Name of Employer Czech Cottage Occupation self employed sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 01 / 2014**

**Transaction ID : VN8P2CH37J3**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 633 Keystone Ave

City River Forest State IL Zip Code 60305-1613

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

Name of Employer Williams-Sonoma Occupation VP of Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2950.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 07 / 2014**

**Transaction ID : VN8P2CJK0B9**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 365 Trailridge Rd SE

City Cedar Rapids State IA Zip Code 52403-2009

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

Name of Employer Iowa Realty Occupation Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 08 / 2014**

**Transaction ID : VN8P2CMWEK8**

Amount of Each Receipt this Period  
**500.00**

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

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

**800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jennie Stewart**

Mailing Address 3936 317th Ave

City State Zip Code  
Preston IA 52069-9333

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 12 / 2014

**Transaction ID : VN8P2CKRZV4**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1821 Grande Ave SE

City State Zip Code  
Cedar Rapids IA 52403-2225

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

Name of Employer Occupation Information Requested  
Hatch Development Group Developer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
325.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 06 / 2014

**Transaction ID : VN8P2CJH7X1**

Amount of Each Receipt this Period  
125.00

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

Mailing Address 9 Governors Rd

City State Zip Code  
Bronxville NY 10708-1603

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

Name of Employer Occupation Information Requested  
GLP Partners Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
575.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 09 / 2014

**Transaction ID : VN8P2CMEQJ9**

Amount of Each Receipt this Period  
75.00

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sarah E. Van Deest**

Mailing Address 340 34th St SE

City Cedar Rapids State IA Zip Code 52403-1918

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

Name of Employer Monica Vernon For Congress Occupation Scheduler

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **688.29**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 24 / 2014**

**Transaction ID : VN8P2CMF2S6**

Amount of Each Receipt this Period  
**57.32**

\* In-Kind: Travel

**B.** Full Name (Last, First, Middle Initial)  
**Sarah E. Van Deest**

Mailing Address 340 34th St SE

City Cedar Rapids State IA Zip Code 52403-1918

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

Name of Employer Monica Vernon For Congress Occupation Scheduler

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **779.37**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 08 / 2014**

**Transaction ID : VN8P2CMS3C6**

Amount of Each Receipt this Period  
**91.08**

\* In-Kind: Catering

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

Mailing Address 302 Butternut Lalne

City Iowa City State IA Zip Code 52246

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

Name of Employer Heartland AEA, Johnston, IA Occupation Educator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 07 / 2014**

**Transaction ID : VN8P2CMHAP6**

Amount of Each Receipt this Period  
**250.00**

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

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

**398.40**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jeanne Marie Wampler**

Mailing Address 3408 C Ave NE

City Cedar Rapids State IA Zip Code 52402-6026

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

Name of Employer Wells Fargo Bank Occupation Administrative Assistant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.14**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 09 / 2014**

**Transaction ID : VN8P2CMNAJ5**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 150 Thompson Dr SE Apt 310

City Cedar Rapids State IA Zip Code 52403-1746

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 22 / 2014**

**Transaction ID : VN8P2CKRZQ2**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 150 Thompson Dr SE Apt 310

City Cedar Rapids State IA Zip Code 52403-1746

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 14 / 2014**

**Transaction ID : VN8P2CN6WF6**

Amount of Each Receipt this Period  
**300.00**

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

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

**400.00**

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

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

FOR LINE NUMBER: PAGE 24 OF 60  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Yellen**

Mailing Address 156 E 79th St  
Apt 1C

City State Zip Code  
New York NY 10075-0570

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

Name of Employer Occupation  
Not employed Not employed

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 09 / 2014**

**Transaction ID : VN8P2CMEQT2**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**100.00**

**10738.54**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 60
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Monica Wolf Vernon**

Mailing Address 326 23rd Street Dr SE

City Cedar Rapids State IA Zip Code 52403-1620

FEC ID number of contributing federal political committee. **C** H4IA01077

Name of Employer Occupation  
Vernon Research Group President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : VN8P2CMZRE3**

Amount of Each Receipt this Period  
100000.00

Home Equity Line of Credit

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

100000.00

100000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Adcraft Printing Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 309 5th Ave SE		Amount of Each Disbursement this Period 19.80
City Cedar Rapids	State IA	
Zip Code 52401-1801	Purpose of Disbursement Printing and Copying	Transaction ID : VN7PT9RY923
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Adcraft Printing Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 309 5th Ave SE		Amount of Each Disbursement this Period 638.79
City Cedar Rapids	State IA	
Zip Code 52401-1801	Purpose of Disbursement Printing and Copying	Transaction ID : VN7PT9S1M56
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Adcraft Printing Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 309 5th Ave SE		Amount of Each Disbursement this Period 104.86
City Cedar Rapids	State IA	
Zip Code 52401-1801	Purpose of Disbursement Printing and Copying	Transaction ID : VN7PT9S1M64
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	763.45
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Adcraft Printing Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 309 5th Ave SE		Amount of Each Disbursement this Period 280.34 <b>Transaction ID : VN7PT9S1M71</b>
City Cedar Rapids	State IA	
Zip Code 52401-1801	Purpose of Disbursement Printing and Copying	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Adcraft Printing Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 309 5th Ave SE		Amount of Each Disbursement this Period 1829.70 <b>Transaction ID : VN7PT9S4V79</b>
City Cedar Rapids	State IA	
Zip Code 52401-1801	Purpose of Disbursement Printing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Adcraft Printing Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 309 5th Ave SE		Amount of Each Disbursement this Period 447.26 <b>Transaction ID : VN7PT9S4V87</b>
City Cedar Rapids	State IA	
Zip Code 52401-1801	Purpose of Disbursement Printing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2557.30
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 60			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Adcraft Printing Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 309 5th Ave SE		Amount of Each Disbursement this Period 1318.24
City Cedar Rapids	State IA Zip Code 52401-1801	
Purpose of Disbursement Printing	Candidate Name	Transaction ID : VN7PT9S4V95
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Adcraft Printing Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 309 5th Ave SE		Amount of Each Disbursement this Period 1039.51
City Cedar Rapids	State IA Zip Code 52401-1801	
Purpose of Disbursement Printing	Candidate Name	Transaction ID : VN7PT9S4VA3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Best Buy, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 7601 Penn Ave S		Amount of Each Disbursement this Period 52.41
City Minneapolis	State MN Zip Code 55423-3645	
Purpose of Disbursement Supplies	Candidate Name	Transaction ID : VN7PT9S4VD6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2410.16
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Best Buy, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 7601 Penn Ave S		Amount of Each Disbursement this Period 42.78
City Minneapolis	State MN	
Zip Code 55423-3645	Purpose of Disbursement Supplies	Transaction ID : VN7PT9S4VE4
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cedar City Properties, LC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 313 3rd Ave SE		Amount of Each Disbursement this Period 2100.00
City Cedar Rapids	State IA	
Zip Code 52401-1506	Purpose of Disbursement Office Rent	Transaction ID : VN7PT9RY9B4
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Cedar City Properties, LC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 313 3rd Ave SE		Amount of Each Disbursement this Period 2100.00
City Cedar Rapids	State IA	
Zip Code 52401-1506	Purpose of Disbursement Office Rent	Transaction ID : VN7PT9S4VF2
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4242.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 60			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dubuque Leader</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1527 Central Ave		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : VN7PT9RYD23</b>
City Dubuque	State IA	
Zip Code 52001-4844	Purpose of Disbursement Advertisement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. First Data</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 12050 Baltimore Ave		Amount of Each Disbursement this Period 699.47 <b>Transaction ID : VN7PT9RY9P1</b>
City Beltsville	State MD	
Zip Code 20705-1247	Purpose of Disbursement Merchant Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. First Data</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2014
Mailing Address 12050 Baltimore Ave		Amount of Each Disbursement this Period 515.36 <b>Transaction ID : VN7PT9S4VK4</b>
City Beltsville	State MD	
Zip Code 20705-1247	Purpose of Disbursement Merchant Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1464.83
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Future Systems, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 6045 Rockwell Dr NE Ste A1		Amount of Each Disbursement this Period 8353.39
City Cedar Rapids	State IA Zip Code 52402-7353	
Purpose of Disbursement Payroll	Category/Type	<b>Transaction ID : VN7PT9S1MD9</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Brenda Sue Kole</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 257 38th Street Dr SE Apt 11		Amount of Each Disbursement this Period 2750.39
City Cedar Rapids	State IA Zip Code 52403-1130	
Purpose of Disbursement Payroll	Category/Type	<b>Transaction ID : VN7PT9S3B93</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Keith Presley</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 1626 8th St NW		Amount of Each Disbursement this Period 1529.39
City Cedar Rapids	State IA Zip Code 52405-1607	
Purpose of Disbursement Payroll	Category/Type	<b>Transaction ID : VN7PT9S3BA1</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8353.39
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Saif Ratul</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2014
Mailing Address 1626 8th St NW		Amount of Each Disbursement this Period 973.53
City Cedar Rapids	State IA	
Zip Code 52405-1607	Purpose of Disbursement Payroll	Transaction ID : VN7PT9S3BB9
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Tyler Redenbaugh</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2014
Mailing Address 245 38th Street Dr SE Apt 13		Amount of Each Disbursement this Period 975.53
City Cedar Rapids	State IA	
Zip Code 52403-1107	Purpose of Disbursement Payroll	Transaction ID : VN7PT9S3BC7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Sarah E. Van Deest</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2014
Mailing Address 340 34th St SE		Amount of Each Disbursement this Period 1297.71
City Cedar Rapids	State IA	
Zip Code 52403-1918	Purpose of Disbursement Payroll	Transaction ID : VN7PT9S3BD5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ryan M. Zmuda</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 15 / 2014</b>
Mailing Address 951 6th St SE Unit 308		Amount of Each Disbursement this Period <b>826.84</b>
City Cedar Rapids	State IA Zip Code 52401-2447	
Purpose of Disbursement Payroll	Category/Type	<b>Transaction ID : VN7PT9S3BE3</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Future Systems, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 15 / 2014</b>
Mailing Address 6045 Rockwell Dr NE Ste A1		Amount of Each Disbursement this Period <b>3844.75</b>
City Cedar Rapids	State IA Zip Code 52402-7353	
Purpose of Disbursement Payroll Taxes	Category/Type	<b>Transaction ID : VN7PT9S1ME7</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Future Systems, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 15 / 2014</b>
Mailing Address 6045 Rockwell Dr NE Ste A1		Amount of Each Disbursement this Period <b>53.70</b>
City Cedar Rapids	State IA Zip Code 52402-7353	
Purpose of Disbursement Payroll Processing Fee	Category/Type	<b>Transaction ID : VN7PT9S1MF5</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3898.45</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 60			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Future Systems, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 6045 Rockwell Dr NE Ste A1		Amount of Each Disbursement this Period 53.70
City Cedar Rapids	State IA Zip Code 52402-7353	
Purpose of Disbursement Payroll Processing Fee	Category/Type	Transaction ID : VN7PT9S3BF1
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Future Systems, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 6045 Rockwell Dr NE Ste A1		Amount of Each Disbursement this Period 3838.75
City Cedar Rapids	State IA Zip Code 52402-7353	
Purpose of Disbursement Payroll Taxes	Category/Type	Transaction ID : VN7PT9S3BH6
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Future Systems, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 6045 Rockwell Dr NE Ste A1		Amount of Each Disbursement this Period 8353.39
City Cedar Rapids	State IA Zip Code 52402-7353	
Purpose of Disbursement Payroll	Category/Type	Transaction ID : VN7PT9S3BK2
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12245.84
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Brenda Sue Kole</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2014
Mailing Address 257 38th Street Dr SE Apt 11		Amount of Each Disbursement this Period 2750.39
City Cedar Rapids	State IA Zip Code 52403-1130	
Purpose of Disbursement Payroll	Candidate Name	Transaction ID : VN7PT9S3BN8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] *

Full Name (Last, First, Middle Initial) <b>B. Keith Presley</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2014
Mailing Address 1626 8th St NW		Amount of Each Disbursement this Period 1529.39
City Cedar Rapids	State IA Zip Code 52405-1607	
Purpose of Disbursement Payroll	Candidate Name	Transaction ID : VN7PT9S3BP6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] *

Full Name (Last, First, Middle Initial) <b>c. Saif Ratul</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2014
Mailing Address 1626 8th St NW		Amount of Each Disbursement this Period 973.53
City Cedar Rapids	State IA Zip Code 52405-1607	
Purpose of Disbursement Payroll	Candidate Name	Transaction ID : VN7PT9S3BQ4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] *

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 60			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Tyler Redenbaugh</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2014
Mailing Address 245 38th Street Dr SE Apt 13		Amount of Each Disbursement this Period 975.53
City Cedar Rapids	State IA	
Zip Code 52403-1107	Purpose of Disbursement Payroll	Transaction ID : VN7PT9S3BT8
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sarah E. Van Deest</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2014
Mailing Address 340 34th St SE		Amount of Each Disbursement this Period 1297.71
City Cedar Rapids	State IA	
Zip Code 52403-1918	Purpose of Disbursement Payroll	Transaction ID : VN7PT9S3BV5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ryan M. Zmuda</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2014
Mailing Address 951 6th St SE Unit 308		Amount of Each Disbursement this Period 826.84
City Cedar Rapids	State IA	
Zip Code 52401-2447	Purpose of Disbursement Payroll	Transaction ID : VN7PT9S3BX1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 60			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. GMMB, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 3050 K St NW Ste 100		Amount of Each Disbursement this Period 80013.76
City Washington	State DC Zip Code 20007-5122	
Purpose of Disbursement Media Buy	Category/Type	Transaction ID : VN7PT9RYC04
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GMMB, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 3050 K St NW Ste 100		Amount of Each Disbursement this Period 78497.97
City Washington	State DC Zip Code 20007-5122	
Purpose of Disbursement Media Buy	Category/Type	Transaction ID : VN7PT9S1MG3
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Google, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 1600 Amphitheatre Pkwy		Amount of Each Disbursement this Period 41.66
City Mountain View	State CA Zip Code 94043-1351	
Purpose of Disbursement Advertisement	Category/Type	Transaction ID : VN7PT9RYC20
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	158553.39
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 60			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Google, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 1600 Amphitheatre Pkwy		Amount of Each Disbursement this Period 41.66
City Mountain View	State CA Zip Code 94043-1351	
Purpose of Disbursement Advertisement	Candidate Name	Transaction ID : VN7PT9S4VP7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Haven's Kitchen</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 109 W 17th St		Amount of Each Disbursement this Period 145.98
City New York	State NY Zip Code 10011-5471	
Purpose of Disbursement Catering	Candidate Name	Transaction ID : VN7PT9RYDP1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Haven's Kitchen</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 109 W 17th St		Amount of Each Disbursement this Period 337.88
City New York	State NY Zip Code 10011-5471	
Purpose of Disbursement Catering	Candidate Name	Transaction ID : VN7PT9S1MS4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	525.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. ImOn Communications, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 625 1st St SE		Amount of Each Disbursement this Period 130.19 <b>Transaction ID : VN7PT9S1MJ8</b>
City Cedar Rapids State IA Zip Code 52401-2030	Purpose of Disbursement Internet Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ImOn Communications, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 625 1st St SE		Amount of Each Disbursement this Period 130.19 <b>Transaction ID : VN7PT9S4VR3</b>
City Cedar Rapids State IA Zip Code 52401-2030	Purpose of Disbursement Internet Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. InterCloud9</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 2522 Chambers Rd Ste 100		Amount of Each Disbursement this Period 495.00 <b>Transaction ID : VN7PT9RYC53</b>
City Tustin State CA Zip Code 92780-6962	Purpose of Disbursement Automated Phone Calls	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	755.38
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. InterCloud9</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 2522 Chambers Rd Ste 100		Amount of Each Disbursement this Period 495.00 <b>Transaction ID : VN7PT9S4VS1</b>
City Tustin State CA Zip Code 92780-6962	Purpose of Disbursement Automated Phone Calls	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. InterCloud9</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 2522 Chambers Rd Ste 100		Amount of Each Disbursement this Period 495.00 <b>Transaction ID : VN7PT9S4VT9</b>
City Tustin State CA Zip Code 92780-6962	Purpose of Disbursement Automated Phone Calls	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. IOWA DEMOCRATIC PARTY</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 5661 Fleur Dr		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : VN7PT9RYC61</b>
City Des Moines State IA Zip Code 50321-2841	Purpose of Disbursement VAN Access	
Candidate Name <b>IOWA DEMOCRATIC PARTY</b>	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5990.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 60			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Iowa Federation of Labor</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 2000 Walker St Ste A		Amount of Each Disbursement this Period 100.00
City Des Moines	State IA Zip Code 50317-5201	
Purpose of Disbursement Event Tickets	Category/Type	Transaction ID : VN7PT9S1MH0
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Brenda Sue Kole</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 257 38th Street Dr SE Apt 11		Amount of Each Disbursement this Period 74.34
City Cedar Rapids	State IA Zip Code 52403-1130	
Purpose of Disbursement Travel	Category/Type	Transaction ID : VN8P2CMF4461
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		* In-Kind Received

Full Name (Last, First, Middle Initial) <b>c. Brenda Sue Kole</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 257 38th Street Dr SE Apt 11		Amount of Each Disbursement this Period 416.55
City Cedar Rapids	State IA Zip Code 52403-1130	
Purpose of Disbursement Health Insurance	Category/Type	Transaction ID : VN7PT9S1MA5
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	590.89
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 60			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Liberty Concepts</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 119 Braintree St		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VN7PT9RYCG0</b>
City Allston State MA Zip Code 02134-1628	Purpose of Disbursement Website Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mailing Services</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 950 Capital Dr SW		Amount of Each Disbursement this Period 782.50 <b>Transaction ID : VN7PT9S4W64</b>
City Cedar Rapids State IA Zip Code 52404-9096	Purpose of Disbursement Mailings	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mission Control Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 114A Mansfield Hollow Rd		Amount of Each Disbursement this Period 8395.44 <b>Transaction ID : VN7PT9S4W97</b>
City Mansfield Center State CT Zip Code 06250-1316	Purpose of Disbursement Printing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9677.94
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mission Control Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 02 / 2014</b>
Mailing Address <b>114A Mansfield Hollow Rd</b>		Amount of Each Disbursement this Period <b>9771.64</b> <b>Transaction ID : VN7PT9S4WA5</b>
City <b>Mansfield Center</b> State <b>CT</b> Zip Code <b>06250-1316</b>	Purpose of Disbursement <b>Printing</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mission Control Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 12 / 2014</b>
Mailing Address <b>114A Mansfield Hollow Rd</b>		Amount of Each Disbursement this Period <b>30445.08</b> <b>Transaction ID : VN7PT9S4WB3</b>
City <b>Mansfield Center</b> State <b>CT</b> Zip Code <b>06250-1316</b>	Purpose of Disbursement <b>Mailing</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NGP VAN, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 01 / 2014</b>
Mailing Address <b>1101 15th St NW Ste 500</b>		Amount of Each Disbursement this Period <b>2100.00</b> <b>Transaction ID : VN7PT9RYCJ6</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20005-5006</b>	Purpose of Disbursement <b>Software</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>42316.72</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 60			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Office Max, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 263 Shuman Blvd		Amount of Each Disbursement this Period 37.22
City Naperville	State IL	
Zip Code 60563-8147	Purpose of Disbursement Office Supplies	Transaction ID : VN7PT9S4WD9
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PCMS, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1050 17th St NW Ste 590		Amount of Each Disbursement this Period 648.75
City Washington	State DC	
Zip Code 20036-5592	Purpose of Disbursement Accounting Fees	Transaction ID : VN7PT9RYCNO
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PCMS, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1050 17th St NW Ste 590		Amount of Each Disbursement this Period 10.82
City Washington	State DC	
Zip Code 20036-5592	Purpose of Disbursement Postage Reimbursement	Transaction ID : VN7PT9RYCP8
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	696.79
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 60			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. PCMS, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 1050 17th St NW Ste 590		Amount of Each Disbursement this Period 850.00
City Washington	State DC	
Zip Code 20036-5592	Purpose of Disbursement Accounting Fees	Transaction ID : VN7PT9S1MT2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ann J. Poe</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 2560 Country Club Pkwy SE		Amount of Each Disbursement this Period 1500.00
City Cedar Rapids	State IA	
Zip Code 52403-1641	Purpose of Disbursement Outside Contract Services	Transaction ID : VN7PT9RY957
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ann J. Poe</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 2560 Country Club Pkwy SE		Amount of Each Disbursement this Period 1500.00
City Cedar Rapids	State IA	
Zip Code 52403-1641	Purpose of Disbursement Outside Contract Services	Transaction ID : VN7PT9S1M89
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3850.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ann J. Poe</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 2560 Country Club Pkwy SE		Amount of Each Disbursement this Period 1200.00 <b>Transaction ID : VN7PT9S4VB0</b>
City Cedar Rapids State IA Zip Code 52403-1641	Purpose of Disbursement Outside Contract Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ann J. Poe</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 2560 Country Club Pkwy SE		Amount of Each Disbursement this Period 15.80 <b>Transaction ID : VN8P2CMF274I</b>
City Cedar Rapids State IA Zip Code 52403-1641	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Keith Presley</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 1626 8th St NW		Amount of Each Disbursement this Period 137.14 <b>Transaction ID : VN7PT9S4VV7</b>
City Cedar Rapids State IA Zip Code 52405-1607	Purpose of Disbursement Health Insurance reimbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1352.94
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Tyler Redenbaugh</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 245 38th Street Dr SE Apt 13		Amount of Each Disbursement this Period 137.75 <b>Transaction ID : VN7PT9S4WN2</b>
City Cedar Rapids	State IA Zip Code 52403-1107	
Purpose of Disbursement Health insurance reimbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Elizabeth Gotschall Slaphey</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 190 Cottage Grove Ave SE Apt 112		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : VN7PT9RYCC9</b>
City Cedar Rapids	State IA Zip Code 52403-1743	
Purpose of Disbursement Fundraising services	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Elizabeth Gotschall Slaphey</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 190 Cottage Grove Ave SE Apt 112		Amount of Each Disbursement this Period 34.00 <b>Transaction ID : VN7PT9RYCD7</b>
City Cedar Rapids	State IA Zip Code 52403-1743	
Purpose of Disbursement Postage Reimbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1671.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Elizabeth Gotschall Slaphey</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 190 Cottage Grove Ave SE Apt 112		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : VN7PT9S1MR6</b>
City Cedar Rapids	State IA Zip Code 52403-1743	
Purpose of Disbursement Fundraising services	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Elizabeth Gotschall Slaphey</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 190 Cottage Grove Ave SE Apt 112		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : VN7PT9S4W30</b>
City Cedar Rapids	State IA Zip Code 52403-1743	
Purpose of Disbursement Fundraising Services	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 500 Staples Dr		Amount of Each Disbursement this Period 42.87 <b>Transaction ID : VN7PT9RYCZ9</b>
City Framingham	State MA Zip Code 01702-4478	
Purpose of Disbursement Supplies	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3042.87
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 60			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

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

Mailing Address 500 Staples Dr

City Framingham State MA Zip Code 01702-4478

Purpose of Disbursement Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 04 / 2014

Amount of Each Disbursement this Period: 285.66

Transaction ID : VN7PT9RYD07

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

Mailing Address 500 Staples Dr

City Framingham State MA Zip Code 01702-4478

Purpose of Disbursement Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 09 / 2014

Amount of Each Disbursement this Period: 47.06

Transaction ID : VN7PT9S1MW7

Full Name (Last, First, Middle Initial)  
**c. Staples**

Mailing Address 500 Staples Dr

City Framingham State MA Zip Code 01702-4478

Purpose of Disbursement Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 11 / 2014

Amount of Each Disbursement this Period: 20.31

Transaction ID : VN7PT9S1MX5

**SUBTOTAL** of Disbursements This Page (optional) ..... 353.03

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 60			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 11 / 2014</b>
Mailing Address <b>500 Staples Dr</b>		Amount of Each Disbursement this Period <b>112.34</b>
City <b>Framingham</b> State <b>MA</b> Zip Code <b>01702-4478</b>	Purpose of Disbursement <b>Supplies</b>	
Candidate Name	Category/Type	<b>Transaction ID : VN7PT9S4WF5</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 17 / 2014</b>
Mailing Address <b>500 Staples Dr</b>		Amount of Each Disbursement this Period <b>112.34</b>
City <b>Framingham</b> State <b>MA</b> Zip Code <b>01702-4478</b>	Purpose of Disbursement <b>Supplies</b>	
Candidate Name	Category/Type	<b>Transaction ID : VN7PT9S1MY3</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 25 / 2014</b>
Mailing Address <b>500 Staples Dr</b>		Amount of Each Disbursement this Period <b>131.04</b>
City <b>Framingham</b> State <b>MA</b> Zip Code <b>01702-4478</b>	Purpose of Disbursement <b>Supplies</b>	
Candidate Name	Category/Type	<b>Transaction ID : VN7PT9S4WG3</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>355.72</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 60			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 500 Staples Dr		Amount of Each Disbursement this Period 105.37
City Framingham	State MA	
Zip Code 01702-4478	Purpose of Disbursement Supplies	Transaction ID : VN7PT9S4WH1
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 500 Staples Dr		Amount of Each Disbursement this Period 12.82
City Framingham	State MA	
Zip Code 01702-4478	Purpose of Disbursement Supplies	Transaction ID : VN7PT9S4WJ9
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 500 Staples Dr		Amount of Each Disbursement this Period 138.85
City Framingham	State MA	
Zip Code 01702-4478	Purpose of Disbursement Supplies	Transaction ID : VN7PT9S4WK6
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	257.04
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 60			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 500 Staples Dr

City Framingham State MA Zip Code 01702-4478

Purpose of Disbursement Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 14 / 2014

Amount of Each Disbursement this Period: 35.29

Transaction ID : VN7PT9S4WM4

Category/Type

Full Name (Last, First, Middle Initial)

**B. US Post Office**

Mailing Address 615 6th Ave SE

City Cedar Rapids State IA Zip Code 52401-1923

Purpose of Disbursement Postage & Mailing Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 03 / 2014

Amount of Each Disbursement this Period: 162.80

Transaction ID : VN7PT9RYDE7

Category/Type

Full Name (Last, First, Middle Initial)

**C. US Post Office**

Mailing Address 615 6th Ave SE

City Cedar Rapids State IA Zip Code 52401-1923

Purpose of Disbursement Postage & Mailing Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 07 / 2014

Amount of Each Disbursement this Period: 735.00

Transaction ID : VN7PT9RYDF5

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... 933.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. US Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 615 6th Ave SE		Amount of Each Disbursement this Period 5.81
City Cedar Rapids	State IA	
Zip Code 52401-1923	Purpose of Disbursement Postage & Mailing Services	Transaction ID : VN7PT9S1N66
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. US Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 615 6th Ave SE		Amount of Each Disbursement this Period 294.00
City Cedar Rapids	State IA	
Zip Code 52401-1923	Purpose of Disbursement Postage & Mailing Services	Transaction ID : VN7PT9S1N74
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. US Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 615 6th Ave SE		Amount of Each Disbursement this Period 147.00
City Cedar Rapids	State IA	
Zip Code 52401-1923	Purpose of Disbursement Postage & Mailing Services	Transaction ID : VN7PT9S1N82
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	446.81
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 60			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. US Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 615 6th Ave SE		Amount of Each Disbursement this Period 246.96 <b>Transaction ID : VN7PT9S4WT0</b>
City Cedar Rapids	State IA	
Zip Code 52401-1923	Purpose of Disbursement Postage & Mailing Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. US Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 615 6th Ave SE		Amount of Each Disbursement this Period 294.00 <b>Transaction ID : VN7PT9S4WV8</b>
City Cedar Rapids	State IA	
Zip Code 52401-1923	Purpose of Disbursement Postage & Mailing Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. US Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 615 6th Ave SE		Amount of Each Disbursement this Period 35.72 <b>Transaction ID : VN7PT9S4WW6</b>
City Cedar Rapids	State IA	
Zip Code 52401-1923	Purpose of Disbursement Postage & Mailing Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	576.68
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 60			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. US Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 615 6th Ave SE		Amount of Each Disbursement this Period 260.56 <b>Transaction ID : VN7PT9S4WX3</b>
City Cedar Rapids	State IA Zip Code 52401-1923	
Purpose of Disbursement Postage & Mailing Services	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sarah E. Van Deest</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 340 34th St SE		Amount of Each Disbursement this Period 551.16 <b>Transaction ID : VN7PT9S1MV9</b>
City Cedar Rapids	State IA Zip Code 52403-1918	
Purpose of Disbursement Health Insurance	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Sarah E. Van Deest</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 340 34th St SE		Amount of Each Disbursement this Period 57.32 <b>Transaction ID : VN8P2CMF2S6I</b>
City Cedar Rapids	State IA Zip Code 52403-1918	
Purpose of Disbursement Travel	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	869.04
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 60			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sarah E. Van Deest</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 340 34th St SE		Amount of Each Disbursement this Period 91.08
City Cedar Rapids	State IA	
Zip Code 52403-1918	Purpose of Disbursement Catering	Transaction ID : VN8P2CMS3C6I
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 54.01
City Lehigh Valley	State PA	
Zip Code 18002-5505	Purpose of Disbursement Telephone Services	Transaction ID : VN7PT9S1N90
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Vesta, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 4400 Alexander Dr		Amount of Each Disbursement this Period 54.52
City Alpharetta	State GA	
Zip Code 30022-3753	Purpose of Disbursement Office Supplies	Transaction ID : VN7PT9RYDN3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	199.61
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Monica Vernon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Vesta, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 4400 Alexander Dr		Amount of Each Disbursement this Period 32.61
City Alpharetta	State GA	
Zip Code 30022-3753	Purpose of Disbursement Office Supplies	Transaction ID : VN7PT9S4X07
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Vesta, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 4400 Alexander Dr		Amount of Each Disbursement this Period 32.61
City Alpharetta	State GA	
Zip Code 30022-3753	Purpose of Disbursement Office Supplies	Transaction ID : VN7PT9S4X15
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	65.22
<b>TOTAL</b> This Period (last page this line number only).....	269016.63

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VN8P2CMZRE3L

Monica Vernon for Congress

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

Monica Wolf Vernon

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
326 23rd Street Dr SE

City State ZIP Code  
Cedar Rapids IA 52403-1620

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

### TERMS

Date Incurred Date Due Interest Rate Secured:  
05 / 12 / 2014 M M / D D / 04/25/2020 4.00 % (apr)  Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... ▶ 100000.00  
**TOTALS** This Period (last page in this line only)..... ▶ 100000.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : VN8P2CMZRE3L

Home Equity Line of Credit

Form/Schedule:

Transaction ID:

# SCHEDULE C-1 (FEC Form 3) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for  
Information found on  
Page \_\_\_\_ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) <b>Monica Vernon for Congress</b>	Transaction ID : VN8P2CMZRE3B	FEC IDENTIFICATION NUMBER <b>C</b> C00545574
--	-------------------------------	---

LENDING INSTITUTION (LENDER) Full Name <b>Banklwa</b>	Amount of Loan 100000.00	Interest Rate (APR) 4.00 %
---	-----------------------------	-------------------------------

Mailing Address 7045 C Ave NE	Date Incurred or Established 05 / 12 / 2014	Date Due 04/25/2020
City State Zip Code Cedar Rapids IA 52402	Back Ref VN8P2CMZRE3L	

A. Has loan been restructured?  No  Yes If yes, date originally incurred

B. If line of credit,  
Amount of this Draw: 100000.00 Total Outstanding Balance: 100000.00

C. Are other parties secondarily liable for the debt incurred?  
 No  Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: real estate

What is the value of this collateral? 325000.00

Does the lender have a perfected security interest in it?  No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify:

What is the estimated value? 0.00

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Location of account:  
Address:  
Date account established:  
City, State, Zip:

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER Typed Name John Thomas Zaber Signature	DATE 05 / 12 / 2014
---	------------------------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

- I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Lori Tomasek Signature Lori Tomasek	[Electronically Filed]	DATE 05 / 12 / 2014
Title VP Retail Banking		