

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO Box 7255 Des Moines IA 50309 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00379479 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 07 01 2009 through 12 31 2009

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 Gina Noll Signature of Treasurer Electronically Filed by Gina Noll Date 01 31 2010

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

Office Use Only FE6AN026 FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
The Hawkeye PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		16927.11
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	55683.50									
(c) Total Receipts (from Line 19) .....	98000.00	185000.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	153683.50	201927.11								
7. Total Disbursements (from Line 31) .....	117713.38	165956.99								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	35970.12	35970.12								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
The Hawkeye PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	12000.00	18000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	12000.00	18000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	86000.00	167000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	98000.00	185000.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	98000.00	185000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	98000.00	185000.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	15672.66	29916.27
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	15672.66	29916.27
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	91320.00	125320.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	10720.72	10720.72
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	117713.38	165956.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	117713.38	165956.99

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	98000.00	185000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	98000.00	185000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	15672.66	29916.27
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	15672.66	29916.27

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 34  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

**A.** Full Name (Last, First, Middle Initial)  
Abbott Laboratories Employee PAC

Mailing Address 100 Abbott Park Rd  
D312 AP6D-2

City North Chicago State IL Zip Code 60064-6028

FEC ID number of contributing federal political committee. **C** C00040279

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 09 / 28 / 2009  
**Transaction ID:** C1534  
 Amount of Each Receipt this Period: 2000.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
Abbott Laboratories Employee PAC

Mailing Address 100 Abbott Park Rd  
D312 AP6D-2

City North Chicago State IL Zip Code 60064-6028

FEC ID number of contributing federal political committee. **C** C00040279

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4500.00

Date of Receipt: 12 / 14 / 2009  
**Transaction ID:** C1545  
 Amount of Each Receipt this Period: 2500.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
Abbott Laboratories Employee PAC

Mailing Address 100 Abbott Park Rd  
D312 AP6D-2

City North Chicago State IL Zip Code 60064-6028

FEC ID number of contributing federal political committee. **C** C00040279

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 14 / 2009  
**Transaction ID:** C1546  
 Amount of Each Receipt this Period: 500.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5000.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 34  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

**A.** Full Name (Last, First, Middle Initial)  
Action Committee for Rural

Mailing Address Electrification PAC  
4301 Wilson Blvd

City Arlington State VA Zip Code 22203-1860

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 2 8 / 2 0 0 9

**Transaction ID:** C1556

Amount of Each Receipt this Period  
2000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
American Chiropractic Association PAC

Mailing Address 1701 Clarendon Blvd

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00102764

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 3 / 2 0 0 9

**Transaction ID:** C1540

Amount of Each Receipt this Period  
2500.00

Receipt

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

Mailing Address 1111 14th St NW Ste 1100

City Washington State DC Zip Code 20005-5627

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 3 1 / 2 0 0 9

**Transaction ID:** C1561

Amount of Each Receipt this Period  
2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 34  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

**A.** Full Name (Last, First, Middle Initial)  
American Health Care Association PAC

Mailing Address 1201 L St NW

City State Zip Code  
Washington DC 20005-4024

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2009

**Transaction ID:** C1530

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
American Health Care Association PAC

Mailing Address 1201 L St NW

City State Zip Code  
Washington DC 20005-4024

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
11 / 20 / 2009

**Transaction ID:** C1542

Amount of Each Receipt this Period  
4000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
American Hospital Assoc PAC

Mailing Address 325 7th St NW Ste 700  
Suite 700

City State Zip Code  
Washington DC 20004-2801

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
12 / 31 / 2009

**Transaction ID:** C1566

Amount of Each Receipt this Period  
2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7500.00**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 34  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

**A.** Full Name (Last, First, Middle Initial)  
American Physical Therapy Association

Mailing Address Physical Therapy PAC  
1111 N. Fairfax Street

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
07 / 27 / 2009

Transaction ID: C1526

Amount of Each Receipt this Period  
5000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
American Seniors Housing Assoc. PAC

Mailing Address 5100 Wisconsin Ave NW Ste 307

City Washington State DC Zip Code 20016-4130

FEC ID number of contributing federal political committee. **C** C00325332

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
MM / DD / YYYY  
07 / 21 / 2009

Transaction ID: C1515

Amount of Each Receipt this Period  
3000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
American Seniors Housing Assoc. PAC

Mailing Address 5100 Wisconsin Ave NW Ste 307

City Washington State DC Zip Code 20016-4130

FEC ID number of contributing federal political committee. **C** C00325332

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
12 / 28 / 2009

Transaction ID: C1559

Amount of Each Receipt this Period  
2000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10000.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 34  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

**A.** Full Name (Last, First, Middle Initial)  
Blue Cross and Blue Shield Assoc. PAC  
Mailing Address 1310 G St NW

City State Zip Code  
Washington DC 20005-3000

FEC ID number of contributing federal political committee. **C** C00194746

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt: M M / D D / Y Y Y Y Y  
09 / 21 / 2009

**Transaction ID:** C1532

Amount of Each Receipt this Period: 1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Build PAC of Ntl Assoc of Home Builders  
Mailing Address 1201 15th St NW

City State Zip Code  
Washington DC 20005-2800

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: M M / D D / Y Y Y Y Y  
12 / 07 / 2009

**Transaction ID:** C1543

Amount of Each Receipt this Period: 5000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Cobham Holdings Inc. PAC  
Mailing Address 2121 Crystal Dr Ste 625

City State Zip Code  
Arlington VA 22202-3706

FEC ID number of contributing federal political committee. **C** C00457051

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M / D D / Y Y Y Y Y  
12 / 28 / 2009

**Transaction ID:** C1555

Amount of Each Receipt this Period: 500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6500.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 34

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

**A.**

Full Name (Last, First, Middle Initial)  
Comcast Corp. PAC

Mailing Address 1701 John F Kennedy Blvd Fl 49

City State Zip Code  
Philadelphia PA 19103-2855

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 9

Transaction ID: C1557

Amount of Each Receipt this Period

2500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Dealers Election Action Committee Of The

Mailing Address National Automotive Dealers Associ  
8400 Westpark Drive

City State Zip Code  
McLean VA 22102-5116

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

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

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: C1563

Amount of Each Receipt this Period

3000.00

Receipt

**C.**

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

Mailing Address 942 S Shady Grove Rd

City State Zip Code  
Memphis TN 38120-4117

FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer Occupation

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

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: C1564

Amount of Each Receipt this Period

5000.00

Receipt

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

10500.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 34  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

**A.** Full Name (Last, First, Middle Initial)  
Federation of American Hospitals PAC

Mailing Address 801 Pennsylvania Ave, NW  
Ste 245

City Washington State DC Zip Code 20004-2604

FEC ID number of contributing federal political committee. **C** C00002261

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 31 / 2009  
**Transaction ID:** C1560  
 Amount of Each Receipt this Period: 1500.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
HSBC North America PAC

Mailing Address 26525 N Riverwoods Blvd

City Mettawa State IL Zip Code 60045-3428

FEC ID number of contributing federal political committee. **C** C00033423

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 28 / 2009  
**Transaction ID:** C1554  
 Amount of Each Receipt this Period: 1000.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
Metlife Inc. Employees Political

Mailing Address Participation Fund A  
1095 Avenue of the Americas

City New York State NY Zip Code 10036

FEC ID number of contributing federal political committee. **C** C00040923

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 07 / 27 / 2009  
**Transaction ID:** C1525  
 Amount of Each Receipt this Period: 1000.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3500.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 34  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

**A.** Full Name (Last, First, Middle Initial)  
Metlife Inc. Employees Political

Mailing Address Participation Fund A  
1095 Avenue of the Americas

City State Zip Code  
New York NY 10036

FEC ID number of contributing federal political committee. **C** C00040923

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	9

**Transaction ID:** C1565

Amount of Each Receipt this Period  
2000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
National Association Of Health

Mailing Address Underwriters PAC  
2000 14th St N Ste 450

City State Zip Code  
Arlington VA 22201-2573

FEC ID number of contributing federal political committee. **C** C00283135

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	0	9

**Transaction ID:** C1527

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
National Association of Professional

Mailing Address Employer Organization PAC  
901 N Pitt St Ste 150

City State Zip Code  
Alexandria VA 22314-1564

FEC ID number of contributing federal political committee. **C** C00447284

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	8	/	2	0	0	9

**Transaction ID:** C1558

Amount of Each Receipt this Period  
500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

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

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

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

FOR LINE NUMBER: PAGE 14 / 34  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

**A.** Full Name (Last, First, Middle Initial)  
National Association of Realtors PAC  
Mailing Address 430 N Michigan Ave

City State Zip Code  
Chicago IL 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	9

**Transaction ID:** C1539  
 Amount of Each Receipt this Period  
 2000.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
National Association of Realtors PAC  
Mailing Address 430 N Michigan Ave

City State Zip Code  
Chicago IL 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	1	/	2	0	0	9

**Transaction ID:** C1547  
 Amount of Each Receipt this Period  
 3000.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
National Beer Wholesalers Assoc. PAC  
Mailing Address 1101 King St Ste 600

City State Zip Code  
Alexandria VA 22314-2965

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	2	/	2	0	0	9

**Transaction ID:** C1552  
 Amount of Each Receipt this Period  
 5000.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10000.00**

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

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

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

FOR LINE NUMBER: PAGE 15 / 34  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

**A.** Full Name (Last, First, Middle Initial)  
National Thoroughbred Racing Assoc. PAC  
Mailing Address 2525 Harrodsburg Rd

City Lexington State KY Zip Code 40504-3355

FEC ID number of contributing federal political committee. **C** C00360008

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt: 07 / 21 / 2009  
**Transaction ID: C1572**  
 Amount of Each Receipt this Period: 3500.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
Northwestern Mutual Life Ins. Co. PAC  
Mailing Address 720 E Wisconsin Ave

City Milwaukee State WI Zip Code 53202-4703

FEC ID number of contributing federal political committee. **C** C00197095

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 21 / 2009  
**Transaction ID: C1548**  
 Amount of Each Receipt this Period: 1500.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
OppenheimerFunds, Inc. PAC  
Mailing Address 1295 State St

City Springfield State MA Zip Code 01111-0001

FEC ID number of contributing federal political committee. **C** C00367920

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 31 / 2009  
**Transaction ID: C1562**  
 Amount of Each Receipt this Period: 1000.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 34  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

**A.** Full Name (Last, First, Middle Initial)  
Principal Life Insurance Company PAC

Mailing Address 711 High St

City State Zip Code  
Des Moines IA 50392-0001

FEC ID number of contributing federal political committee. **C** C00128918

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 2 1 / 2 0 0 9

**Transaction ID:** C1528

Amount of Each Receipt this Period  
1500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Verizon Communications Inc Good

Mailing Address Government Club  
1300 I St NW Ste 400

City State Zip Code  
Washington DC 20005-3314

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 0 8 / 2 0 0 9

**Transaction ID:** C1531

Amount of Each Receipt this Period  
5000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Wine & Spirits Wholesalers America PAC

Mailing Address 805 15th St NW Ste 430

City State Zip Code  
Washington DC 20005-2273

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

**Transaction ID:** C1549

Amount of Each Receipt this Period  
5000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **11500.00**

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



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

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

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

**A.**

Full Name (Last, First, Middle Initial)  
Winston & Strawn LLP PAC

Mailing Address 1700 K St NW

City State Zip Code  
Washington DC 20006-3817

FEC ID number of contributing federal political committee. **C** C00282921

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	9

Transaction ID: C1533

Amount of Each Receipt this Period  
5000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	86000.00

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

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

FOR LINE NUMBER: PAGE 18 / 34  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

**A.** Full Name (Last, First, Middle Initial)  
Elaine J. Clark

Mailing Address PO Box 3385

City State Zip Code  
Stateline NV 89449-3385

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

Name of Employer N/a Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 14 / 2009  
Transaction ID: C1544  
Amount of Each Receipt this Period: 5000.00  
Receipt

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

Mailing Address 6414 Needle Leaf Dr

City State Zip Code  
Rockville MD 20852-4150

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

Name of Employer Bksh And Associates Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 10 / 26 / 2009  
Transaction ID: C1541  
Amount of Each Receipt this Period: 250.00  
Receipt

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

Mailing Address 6414 Needle Leaf Dr

City State Zip Code  
Rockville MD 20852-4150

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

Name of Employer Bksh And Associates Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 28 / 2009  
Transaction ID: C1553  
Amount of Each Receipt this Period: 250.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 5500.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 34  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

**A.**

Full Name (Last, First, Middle Initial) Campbell Kaufman		Date of Receipt MM / DD / YYYY 12 / 21 / 2009	
Mailing Address 2109 Woodmont Rd		<b>Transaction ID:</b> C1550	
City Alexandria	State VA	Zip Code 22307-1156	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cornerstone Government Affairs	Occupation EVP	Aggregate Year-to-Date 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**B.**

Full Name (Last, First, Middle Initial) James E. Smith		Date of Receipt MM / DD / YYYY 12 / 21 / 2009	
Mailing Address 5214 Farrington Rd		<b>Transaction ID:</b> C1551	
City Bethesda	State MD	Zip Code 20816-2920	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer The Smith-Free Group	Occupation Chairman	Aggregate Year-to-Date 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**C.**

Full Name (Last, First, Middle Initial) William Walters		Date of Receipt MM / DD / YYYY 09 / 08 / 2009	
Mailing Address 1685 Hunting Creek Dr		<b>Transaction ID:</b> C1529	
City Alexandria	State VA	Zip Code 22314-6220	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Acute Long Term Hosp Assn	Occupation Ceo	Aggregate Year-to-Date 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>12000.00</b>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 34

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

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

NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

A.	Full Name (Last, First, Middle Initial) Charles E. Grassley	Transaction ID: E759 Date of Disbursement 10 / 13 / 2009
	Mailing Address 31705 Westbrook St	Amount of Each Disbursement this Period 1548.39
	City Cedar Falls State IA Zip Code 50613-8317	
	Purpose of Disbursement Reimbursement: See Below	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		REIMBURSEMENT: SEE BELOW

B.	Full Name (Last, First, Middle Initial) Charles E. Grassley	Transaction ID: E769 Date of Disbursement 11 / 17 / 2009
	Mailing Address 31705 Westbrook St	Amount of Each Disbursement this Period 1067.82
	City Cedar Falls State IA Zip Code 50613-8317	
	Purpose of Disbursement Reimbursement: See Below	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		REIMBURSEMENT: SEE BELOW

C.	Full Name (Last, First, Middle Initial) Capital Knowledge Consulting	Transaction ID: E748 Date of Disbursement 07 / 09 / 2009
	Mailing Address PO Box 7255	Amount of Each Disbursement this Period 2300.00
	City Des Moines State IA Zip Code 50309-	
	Purpose of Disbursement bookkeeping	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		BOOKKEEPING

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	4916.21
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 34

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

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Capital Knowledge Consulting  Mailing Address PO Box 7255  City Des Moines State IA Zip Code 50309-  Purpose of Disbursement bookkeeping Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E757 Date of Disbursement 10 / 07 / 2009  Amount of Each Disbursement this Period 2200.00  BOOKKEEPING
<b>B.</b>	Full Name (Last, First, Middle Initial) Hoffman Consulting  Mailing Address 3905 Sylvian Avenue  City Sioux City State IA Zip Code 51104-1325  Purpose of Disbursement generic fundraising fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E754 Date of Disbursement 10 / 01 / 2009  Amount of Each Disbursement this Period 1850.00  GENERIC FUNDRAISING FEE
<b>C.</b>	Full Name (Last, First, Middle Initial) Hoffman Consulting  Mailing Address 3905 Sylvian Avenue  City Sioux City State IA Zip Code 51104-1325  Purpose of Disbursement generic fundraising fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E771 Date of Disbursement 12 / 04 / 2009  Amount of Each Disbursement this Period 2775.00  GENERIC FUNDRAISING FEE

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

6825.00

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 22 / 34

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

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

A.	Full Name (Last, First, Middle Initial) Iowa Christian Alliance	Transaction ID: E773 Date of Disbursement 09 / 11 / 2009
	Mailing Address 939 Office Park Rd	Amount of Each Disbursement this Period 1000.00
	City West Des Moines State IA Zip Code 50265-2505	
	Purpose of Disbursement Charitable Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CHARITABLE CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) Iowa Christian Alliance	Transaction ID: E772 Date of Disbursement 10 / 02 / 2009
	Mailing Address 939 Office Park Rd	Amount of Each Disbursement this Period 55.00
	City West Des Moines State IA Zip Code 50265-2505	
	Purpose of Disbursement Charitable Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CHARITABLE CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) The Monocle	Transaction ID: E749 Date of Disbursement 07 / 29 / 2009
	Mailing Address 107 D Street, Ne	Amount of Each Disbursement this Period 459.50
	City Washington State DC Zip Code 20002-	
	Purpose of Disbursement generic catering costs Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		GENERIC CATERING COSTS

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1514.50
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

PAGE 23 / 34

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

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

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

Mailing Address 107 D Street, Ne

City Washington State DC Zip Code 20002-

Purpose of Disbursement generic catering costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** E760  
**Date of Disbursement:** 10 / 20 / 2009

Amount of Each Disbursement this Period  
589.00

Category/Type  
GENERIC CATERING COSTS

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

Mailing Address 330 5th Ave Fl 5

City New York State NY Zip Code 10001-3101

Purpose of Disbursement Generic Meals

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** E768  
**Date of Disbursement:** 11 / 17 / 2009

Amount of Each Disbursement this Period  
1768.00

Category/Type  
GENERIC MEALS

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	2357.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	15612.71

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Kelly Ayotte</p> <p>Mailing Address PO Box 233</p> <p>City Nashua State NH Zip Code 03061-0233</p> <p>Purpose of Disbursement G-2010</p> <p>Candidate Name KELLY A AYOTTE</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E731 <b>Date of Disbursement</b> 09 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>Category/Type G-2010</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Baker for US Senate 2010</p> <p>Mailing Address 17 Cooper Ln</p> <p>City Conway State AR Zip Code 72034-7935</p> <p>Purpose of Disbursement P-2010</p> <p>Candidate Name GILBERT BAKER</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E740 <b>Date of Disbursement</b> 12 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Category/Type P-2010</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bennett Election Committee, Inc.</p> <p>Mailing Address 175 S West Temple Ste 650</p> <p>City Salt Lake City State UT Zip Code 84101-1422</p> <p>Purpose of Disbursement G-2010</p> <p>Candidate Name ROBERT F BENNETT</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E741 <b>Date of Disbursement</b> 12 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>Category/Type G-2010</p>

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

12500.00

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

A.	Full Name (Last, First, Middle Initial) Bennett Election Committee, Inc.	Transaction ID: E721 Date of Disbursement 08 / 06 / 2009
	Mailing Address 175 S West Temple Ste 650	Amount of Each Disbursement this Period 2500.00
	City Salt Lake City State UT Zip Code 84101-1422	
	Purpose of Disbursement P-2010	Category/Type
	Candidate Name ROBERT F BENNETT	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		P-2010

B.	Full Name (Last, First, Middle Initial) Friends of Roy Blunt	Transaction ID: E727 Date of Disbursement 09 / 22 / 2009
	Mailing Address PO Box 50100	Amount of Each Disbursement this Period 5000.00
	City Springfield State MO Zip Code 65805-0100	
	Purpose of Disbursement P-2010	Category/Type
	Candidate Name ROY BLUNT	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		P-2010

C.	Full Name (Last, First, Middle Initial) The Richard Burr Committee	Transaction ID: E745 Date of Disbursement 12 / 23 / 2009
	Mailing Address PO Box 5928	Amount of Each Disbursement this Period 5000.00
	City Winston Salem State NC Zip Code 27113-5928	
	Purpose of Disbursement G-2010	Category/Type
	Candidate Name RICHARD BURR	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		G-2010

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	12500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) The Richard Burr Committee</p> <p>Mailing Address PO Box 5928</p> <p>City Winston Salem State NC Zip Code 27113-5928</p> <p>Purpose of Disbursement P-2010</p> <p>Candidate Name RICHARD BURR</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E723 <b>Date of Disbursement</b> 08 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>P-2010</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Castle Campaign Fund</p> <p>Mailing Address PO Box 133</p> <p>City Wilmington State DE Zip Code 19899-0133</p> <p>Purpose of Disbursement P-2010</p> <p>Candidate Name MICHAEL N CASTLE</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E732 <b>Date of Disbursement</b> 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>P-2010</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Coburn for Senate 2010</p> <p>Mailing Address PO Box 977</p> <p>City Muskogee State OK Zip Code 74402-0977</p> <p>Purpose of Disbursement P-2010</p> <p>Candidate Name THOMAS A COBURN</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E739 <b>Date of Disbursement</b> 12 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>P-2010</p>

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

9000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Coburn for Senate 2010 Mailing Address PO Box 977 City Muskogee State OK Zip Code 74402-0977 Purpose of Disbursement P-2010 Candidate Name THOMAS A COBURN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E722 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 1500.00 Category/Type P-2010

<b>B.</b> Full Name (Last, First, Middle Initial) Carly for California Mailing Address 455 Capitol Mall Ste 801 City Sacramento State CA Zip Code 95814-4420 Purpose of Disbursement P-2010 Candidate Name CARLY FIORINA Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E746 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00 Category/Type P-2010

<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Trey Grayson Mailing Address PO Box 175726 City Covington State KY Zip Code 41017-5726 Purpose of Disbursement P-2010 Candidate Name C M GRAYSON Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E737 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00 Category/Type P-2010

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

A.

Full Name (Last, First, Middle Initial)  
Friends of Trey Grayson

Mailing Address PO Box 175726

City State Zip Code  
Covington KY 41017-5726

Purpose of Disbursement  
P-2010

Candidate Name  
C M GRAYSON

Office Sought:  House  
 Senate  
 President

State: KY District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: E728

Date of Disbursement

09 / 23 / 2009

Amount of Each Disbursement this Period

2500.00

P-2010

B.

Full Name (Last, First, Middle Initial)  
Georgians For Isakson

Mailing Address 6000 Lake Forrest Drive #108

City State Zip Code  
Atla Nta GA 30328-

Purpose of Disbursement  
P-2010

Candidate Name  
JOHN HARDY ISAKSON

Office Sought:  House  
 Senate  
 President

State: GA District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: E744

Date of Disbursement

12 / 23 / 2009

Amount of Each Disbursement this Period

5000.00

P-2010

C.

Full Name (Last, First, Middle Initial)  
King For Congress

Mailing Address 116 N. Main St  
P.O. Box 400

City State Zip Code  
Early IA 50535-0400

Purpose of Disbursement  
P-2010

Candidate Name  
STEVE MR. KING

Office Sought:  House  
 Senate  
 President

State: IA District: 05

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: E742

Date of Disbursement

12 / 17 / 2009

Amount of Each Disbursement this Period

2500.00

P-2010

SUBTOTAL of Disbursements This Page (optional) ▶

10000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) King For Congress</p> <p>Mailing Address 116 N. Main St P.O. Box 400</p> <p>City Early State IA Zip Code 50535-0400</p> <p>Purpose of Disbursement P-2010</p> <p>Candidate Name STEVE MR. KING</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E735 <b>Date of Disbursement</b> 10 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>P-2010</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Kirk for Senate</p> <p>Mailing Address PO Box 8</p> <p>City Winnetka State IL Zip Code 60093-0008</p> <p>Purpose of Disbursement P-2010</p> <p>Candidate Name MARK STEVEN KIRK</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E736 <b>Date of Disbursement</b> 11 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>P-2010</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Latham For Congress</p> <p>Mailing Address PO Box 71</p> <p>City Clarion State IA Zip Code 50525-0071</p> <p>Purpose of Disbursement P-2010</p> <p>Candidate Name THOMAS P. LATHAM</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E734 <b>Date of Disbursement</b> 10 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>P-2010</p>

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

10000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

A.	Full Name (Last, First, Middle Initial) Friends of John McCain	Transaction ID: E725 Date of Disbursement 08 / 06 / 2009
	Mailing Address PO Box 16664	
	City Arlington State VA Zip Code 22215-1664	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement P-2010 Candidate Name JOHN S MCCAIN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00	Category/Type P-2010
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Lisa Murkowski for US Senate	Transaction ID: E743 Date of Disbursement 12 / 22 / 2009
	Mailing Address Po Box 100847	
	City Anchorage State AK Zip Code 99510-	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement G-2010 Candidate Name LISA MURKOWSKI Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00	Category/Type G-2010
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Lisa Murkowski for US Senate	Transaction ID: E724 Date of Disbursement 08 / 06 / 2009
	Mailing Address Po Box 100847	
	City Anchorage State AK Zip Code 99510-	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement P-2010 Candidate Name LISA MURKOWSKI Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00	Category/Type P-2010
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jane Norton for Colorado</p> <p>Mailing Address 8006 E Arapahoe Rd Unit 150 Room 925</p> <p>City Englewood State CO Zip Code 80112-6832</p> <p>Purpose of Disbursement P-2010</p> <p>Candidate Name JANE BERGMAN NORTON</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E730 <b>Date of Disbursement</b> 09 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>P-2010</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of John Thune</p> <p>Mailing Address 200 N Phillips Ave Ste L101</p> <p>City Sioux Falls State SD Zip Code 57104-6059</p> <p>Purpose of Disbursement G-2010</p> <p>Candidate Name JOHN THUNE</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E729 <b>Date of Disbursement</b> 09 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>G-2010</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Toomey for Senate Committee</p> <p>Mailing Address 2720 Jordan Rd</p> <p>City Orefield State PA Zip Code 18069-9479</p> <p>Purpose of Disbursement P-2010</p> <p>Candidate Name PATRICK JOSEPH TOOMEY</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E726 <b>Date of Disbursement</b> 09 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>P-2010</p>

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

12500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) David Vitter For US Senate  Mailing Address PO Box 8175  City Metairie State LA Zip Code 70011-8175  Purpose of Disbursement G-2010 Candidate Name DAVID VITTER Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> E738 Date of Disbursement 12 / 15 / 2009	Amount of Each Disbursement this Period 5000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) David Vitter For US Senate  Mailing Address PO Box 8175  City Metairie State LA Zip Code 70011-8175  Purpose of Disbursement P-2010 Candidate Name DAVID VITTER Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> E733 Date of Disbursement 10 / 13 / 2009	Amount of Each Disbursement this Period 5000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Republican Party of Iowa  Mailing Address 621 E 9th St  City Des Moines State IA Zip Code 50309-5505  Purpose of Disbursement 2009 CONTRIBUTION Candidate Name REPUBLICAN PARTY OF IOWA Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> E774 Date of Disbursement 12 / 30 / 2009	Amount of Each Disbursement this Period 320.00

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

10320.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

A.

Full Name (Last, First, Middle Initial)  
Republican Party of Iowa

Mailing Address 621 E 9th St

City Des Moines State IA Zip Code 50309-5505

Purpose of Disbursement  
2009 CONTRIBUTION

Candidate Name  
REPUBLICAN PARTY OF IOWA

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼  
Other

Transaction ID: E762

Date of Disbursement

<sup>M</sup> /  <sup>M</sup> /  <sup>D</sup> /  <sup>D</sup> /  <sup>Y</sup> /  <sup>Y</sup> /  <sup>Y</sup> /  <sup>Y</sup>

Amount of Each Disbursement this Period

2009 CONTRIBUTION

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

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 34 / 34

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

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NAME OF COMMITTEE (In Full)  
The Hawkeye PAC

A.

Full Name (Last, First, Middle Initial)  
Stephen Burgmeier For Iowa

Mailing Address 2213 Wintergreen Blvd

City Lockridge State IA Zip Code 52635-8041

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: E752

Date of Disbursement

08 / 06 / 2009

Amount of Each Disbursement this Period

10000.00

B.

Full Name (Last, First, Middle Initial)  
Iowans for Josh Thurston

Mailing Address 1812 Chandler St NW

City Cedar Rapids State IA Zip Code 52404-

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: E765

Date of Disbursement

11 / 05 / 2009

Amount of Each Disbursement this Period

500.00

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

10500.00

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

10500.00