

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Wayne Iverson for Congress

ADDRESS (number and street)

PO Box 420697

Check if different than previously reported. (ACC)

San Diego

CA

92142-0697

2. FEC IDENTIFICATION NUMBER ▼

C C00502070

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CA

52

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Janet Lynn Iverson

Signature of Treasurer Janet Lynn Iverson

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Wayne Iverson for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0	35184.52
(b) Total Contribution Refunds (from Line 20(d)) .....	0	500
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0	34684.52
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	21725	108120.66
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	2005
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	21725	106115.66
8. Cash on Hand at Close of Reporting Period (from Line 27).....	3568.88	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	75000	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Wayne Iverson for Congress**

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

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

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	21725	108120.66
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0	500
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	500
21. OTHER DISBURSEMENTS .....	0	0
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	21725	108620.66

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	25293.88
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0
25. SUBTOTAL (add Line 23 and Line 24).....	25293.88
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	21725
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3568.88

**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 5 OF 9
	<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)  
**Wayne Iverson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Us Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2012
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 15 <b>Transaction ID : B-E-393</b>
City Saint Louis	State MO	
Zip Code 63179-0408	Purpose of Disbursement Constant contacts	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Dr. Wayne Iverson</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 20000 <b>Transaction ID : B-E-392</b>
City San Diego	State CA	
Zip Code 92142-0697	Purpose of Disbursement Other: repayment of candidate loan	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Us Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2012
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 15 <b>Transaction ID : B-E-389</b>
City Saint Louis	State MO	
Zip Code 63179-0408	Purpose of Disbursement CONSTANT CONTACTS	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	20030.00
<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 6 OF 9
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Wayne Iverson for Congress**

Full Name (Last, First, Middle Initial) <b>A. Us Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2012
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 15 <b>Transaction ID : B-E-390</b>
City Saint Louis	State MO	
Zip Code 63179-0408	Purpose of Disbursement Constant contacts	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Aristotle International</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2012
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 1680 <b>Transaction ID : B-E-391</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement campaign software	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>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	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1695.00
<b>TOTAL</b> This Period (last page this line number only).....	21725.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Wayne Iverson for Congress** Transaction ID : **SC/10-L1**

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

City	State	ZIP Code
San Diego	CA	92142-0697

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

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
09 / 14 / 2011	None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	5000.00
<b>TOTALS</b> This Period (last page in this line only).....	[ ]

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

**SCHEDULE C (FEC Form 3)  
LOANS**

NAME OF COMMITTEE (In Full) **Wayne Iverson for Congress** Transaction ID : **SC/10-L2**

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

City	State	ZIP Code
San Diego	CA	92142-0697

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000	0	50000

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 15 / Y 2011	M / D / Y None	non % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	50000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

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



**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **Dr. Wayne Iverson** *[PERSONAL FUNDS]* Election: 2012  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
 PO Box 420697

City State ZIP Code  
 San Diego CA 92142-0697

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

Date Incurred M 03 / D 21 / Y 2012	Date Due M / D / Y None	Interest Rate NONE % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	20000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	75000.00

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