

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL MILLER-MEEKS FOR CONGRESS			
ADDRESS (number and street) PO BOX 33			
CITY OTTUMWA	STATE IA	ZIP CODE 52501-0033	
2. NAME OF CANDIDATE MILLER-MEEKS, MARIANNETTE JANE, , ,		3. OFFICE SOUGHT (State and District) House IA 01	
4. FEC IDENTIFICATION NUMBER C00558825			
5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
A. FULL NAME GERDIN, MICHAEL, , ,			
MAILING ADDRESS 3843 TIMBER POINTE DR NE		Name of Employer HEARTLAND EXPRESS TRUCKING	Date (month, day, year) 05/31/2022
CITY SOLOON		STATE IA	ZIP CODE 52333-9507
		Transaction ID : 6F36DAE01CB1D42B	Amount 1000.00
		Occupation CHAIRMAN & CEO	
B. FULL NAME GREEN, WILLIAM, R., DR., MD			
MAILING ADDRESS 2408 SKYLINE PT		Name of Employer NONE	Date (month, day, year) 05/31/2022
CITY JONESBORO		STATE AR	ZIP CODE 72404-8079
		Transaction ID : 653DA1174CAEB4CE	Amount 2000.00
		Occupation RETIRED	
C. FULL NAME DITTMER, THOMAS, , ,			
MAILING ADDRESS 317 PERU OLENA RD E		Name of Employer INFORMATION REQUESTED	Date (month, day, year) 05/31/2022
CITY NORWALK		STATE OH	ZIP CODE 44857-8962
		Transaction ID : 62451E090AB97457A	Amount 1000.00
		Occupation INFORMATION REQUESTED	
D. FULL NAME MOYER, WILLIAM, , ,			
MAILING ADDRESS 37 CEDAR CIR		Name of Employer NONE	Date (month, day, year) 05/31/2022
CITY NEWVILLE		STATE PA	ZIP CODE 17241-9483
		Transaction ID : 64059B9EDB8E24EA	Amount 1000.00
		Occupation RETIRED	
E. FULL NAME GREEN, WILLIAM, R., DR., MD			
MAILING ADDRESS 2408 SKYLINE PT		Name of Employer NONE	Date (month, day, year) 05/31/2022
CITY JONESBORO		STATE AR	ZIP CODE 72404-8079
		Transaction ID : 6A73F93BC539749B2	Amount 1000.00
		Occupation RETIRED	
SIGNATURE (optional) DATWYLER, THOMAS, , ,		DATE 06/06/2022	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100
[Electronically Filed]			

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

FEC FORM 6
(Revised 03/2016)

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE PAUSTIAN, ROSS, , MR., 389 W PARKVIEW DRIVE WALCOTT IA 52773-7781	Name of Employer SELF-EMPLOYED Transaction ID : 60C8378A6C92C4C02BA3 Occupation FARMER	Date (month, day, year) 05/31/2022	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE MYERS, ROBERT, , , 4770 WINDSOR CIR PLEASANT HILL IA 50327-0965	Name of Employer RETIRED Transaction ID : 6FFDF2667803F48BDB9F Occupation RETIRED	Date (month, day, year) 05/31/2022	Amount 1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE BAKER, WILLIAM, G., MAJ., USA RET. 6311 W SHANNON ST CHANDLER AZ 85226-5885	Name of Employer NONE Transaction ID : 629BDD24469624E0F82D Occupation RETIRED	Date (month, day, year) 05/31/2022	Amount 2900.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE SUKUP, EUGENE, , , 101 N 6TH ST SHEFFIELD IA 50475-5002	Name of Employer INFORMATION REQUESTED Transaction ID : 62D560D9FB70A431A918 Occupation INFORMATION REQUESTED	Date (month, day, year) 05/31/2022	Amount 1000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE BOONE, DAN, W., MR., III 4123 SPRING IS OKATIE SC 29909-4041	Name of Employer RETIRED Transaction ID : 6559FCCDF94E24A5FA4E Occupation RETIRED	Date (month, day, year) 05/31/2022	Amount 2900.00

continuation page

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE DIEST, BOB, VAN, , PO BOX 610 WEBSTER CITY IA 50595-0610	Name of Employer INFORMATION REQUESTED Transaction ID : 67DFC60E2336E4EC7B08 Occupation INFORMATION REQUESTED	Date (month, day, year) 05/31/2022	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE MCCAUSLAND, PETER, , , 11450 SE DIXIE HWY HOBE SOUND FL 33455-5233	Name of Employer INFORMATION REQUESTED Transaction ID : 6ECAE28E7DB44468B81B Occupation INFORMATION REQUESTED	Date (month, day, year) 05/31/2022	Amount 1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE KING, MARY, , , 100 SAND BUNKER CT FRONT ROYAL VA 22630-6979	Name of Employer SELF EMPLOYED Transaction ID : 6C2D698EC105046AB993 Occupation RETIRED MEDICAL TECHNOLOGIST	Date (month, day, year) 05/31/2022	Amount 2900.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE DUNLAP, BOBBY, , MR., PO BOX 720 BATESVILLE MS 38606-0720	Name of Employer DUNLAP KYLE CO INC Transaction ID : 6BA553B7F266D4B28B32 Occupation CEO	Date (month, day, year) 05/31/2022	Amount 1000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE EYEPAC POLITICAL ACTION COMMITTEE FOR AMERICAN SOCIETY OF CATARACT AND REFRACTIVE SURGERY 12587 FAIR LAKES CIR STE 348 FAIRFAX VA 22033-3822	Name of Employer INFORMATION REQUESTED Transaction ID : 6A25D7A3322A946F2BD9 Occupation INFORMATION REQUESTED	Date (month, day, year) 06/04/2022	Amount 2500.00

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B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount