

# 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 06 / 05 / 2012 in the State of CA

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

- General (30G)  Runoff (30R)  Special (30S)

Election on 06 / 05 / 2012 in the State of CA

5. Covering Period

01 / 01 / 2012 through 03 / 31 / 2012

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

04 / 13 / 2012

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								
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**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))....	11618.12	27579.97
(b) Total Contribution Refunds (from Line 20(d)) .....	0	500
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	11618.12	27079.97
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	16428.63	27927.13
(b) Total Offsets to Operating Expenditures (from Line 14).....	25	2005
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	16403.63	25922.13
8. Cash on Hand at Close of Reporting Period (from Line 27).....	76157.86	
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).....	2700	2700
(ii) Unitemized.....	2135	15440
(iii) TOTAL of contributions from individuals ▶	4835	18140
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	5000	5000
(d) The Candidate.....	1783.12	4439.97
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	11618.12	27579.97
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0	0
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	20000	75000
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	20000	75000
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	25	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>	31643.12	104584.99

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	16428.63	27927.13
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) ►	16428.63	28427.13

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	60943.37
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	31643.12
25. SUBTOTAL (add Line 23 and Line 24).....	92586.49
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	16428.63
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	76157.86

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. James B Manning**

Mailing Address 9728 Verlaine Court

City Las Vegas State NV Zip Code 89145-8695

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

Name of Employer Bone & Joint Specialists Occupation Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 30 / 2012**

**Transaction ID : A-C169**

Amount of Each Receipt this Period  
**250**  
 contribution

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

Mailing Address 2717 Miamisburg Centerville Road

City Dayton State OH Zip Code 45459-3797

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

Name of Employer self Occupation Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 20 / 2012**

**Transaction ID : A-C163**

Amount of Each Receipt this Period  
**300**  
 Contribution

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

Mailing Address 939 Old Chester Road

City Far Hills State NJ Zip Code 07931-2657

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 27 / 2012**

**Transaction ID : A-C236**

Amount of Each Receipt this Period  
**200**

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

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

**750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Gary Prodanovich**

Mailing Address 4060 4th Avenue  
Suite 600

City San Diego State CA Zip Code 92103-2121

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

Name of Employer self Occupation Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 22 / 2012

**Transaction ID : A-C203**

Amount of Each Receipt this Period  
Contribution 250

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

Mailing Address 9600 Grand Isle Lane

City Las Vegas State NV Zip Code 89144-0840

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

Name of Employer self Occupation Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 21 / 2012

**Transaction ID : A-C161**

Amount of Each Receipt this Period  
Contribution 500

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

Mailing Address 9720 Verlaine Court

City Las Vegas State NV Zip Code 89145-8695

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

Name of Employer Self Occupation Medical Doctor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 22 / 2012

**Transaction ID : A-C234**

Amount of Each Receipt this Period  
Contribution 100

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Jane Orient**

Mailing Address 1601 N Tucson Boulevard  
Suite 9

City Tucson State AZ Zip Code 85716-3405

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

Name of Employer Jane Orient Enterprises Occupation physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**01 / 02 / 2012**

**Transaction ID : A-C96**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 1601 N Tucson Boulevard  
Suite 9

City Tucson State AZ Zip Code 85716-3405

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

Name of Employer Jane Orient Enterprises Occupation physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**01 / 21 / 2012**

**Transaction ID : A-C160**

Amount of Each Receipt this Period  
**100**

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Charles J Jablecki**

Mailing Address 2759 Costebelle Drive

City La Jolla State CA Zip Code 92037-3518

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

Name of Employer self Occupation physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**02 / 20 / 2012**

**Transaction ID : A-C206**

Amount of Each Receipt this Period  
**500**

contribution

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

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

**850.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 36
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Richard Amerling**

Mailing Address 61 Irving Place  
Apt. 1A

City New York State NY Zip Code 10003-2325

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

Name of Employer Beth Israel Med Center Occupation Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 22 / 2012**

**Transaction ID : A-C235**

Amount of Each Receipt this Period  
**250**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**250.00**

**2700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 36
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Association of American Physicians and Surgeons-PAC**

Mailing Address 1601 N Tucson Boulevard  
Suite 9

City Tucson State AZ Zip Code 85716-3405

FEC ID number of contributing federal political committee. **C** C00041590

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2012

**Transaction ID : A-C166**

Amount of Each Receipt this Period  
 Contribution 5000

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

5000.00

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 36
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Wayne Iverson**

Mailing Address PO Box 420697

City San Diego State CA Zip Code 92142-0697

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer Self Occupation Physician

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**79439.97**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 31 / 2012**

**Transaction ID : A-I221**

Amount of Each Receipt this Period  
**6.96**

Inkind: telephone

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

Mailing Address PO Box 420697

City San Diego State CA Zip Code 92142-0697

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer Self Occupation Physician

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**79439.97**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 31 / 2012**

**Transaction ID : A-I219**

Amount of Each Receipt this Period  
**11.2**

Inkind: utilities

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

Mailing Address PO Box 420697

City San Diego State CA Zip Code 92142-0697

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer Self Occupation Physician

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**79439.97**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2012**

**Transaction ID : A-I226**

Amount of Each Receipt this Period  
**15**

Inkind: Staff health insurance

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>33.16</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 36
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Wayne Iverson**

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**79439.97**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03		31		2012

**Transaction ID : A-I227**

Amount of Each Receipt this Period  
**254.15**

Inkind: **staff salary**

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

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**79439.97**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		31		2012

**Transaction ID : A-I106**

Amount of Each Receipt this Period  
**15**

Inkind: **Staff Health Insurance**

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

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**79439.97**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		31		2012

**Transaction ID : A-I224**

Amount of Each Receipt this Period  
**302.35**

Inkind: **rent**

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

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

**571.50**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 36
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Wayne Iverson**

Mailing Address PO Box 420697

City San Diego State CA Zip Code 92142-0697

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer Self Occupation Physician

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**79439.97**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 29 / 2012**

**Transaction ID : A-I223**

Amount of Each Receipt this Period  
**302.35**

Inkind: rent

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

Mailing Address PO Box 420697

City San Diego State CA Zip Code 92142-0697

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer Self Occupation Physician

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**79439.97**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 29 / 2012**

**Transaction ID : A-I218**

Amount of Each Receipt this Period  
**9.41**

Inkind: utilities

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

Mailing Address PO Box 420697

City San Diego State CA Zip Code 92142-0697

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer Self Occupation Physician

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**79439.97**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2012**

**Transaction ID : A-I222**

Amount of Each Receipt this Period  
**302.35**

Inkind: rent

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

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

**614.11**

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 36
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Wayne Iverson**

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**79439.97**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**02 / 29 / 2012**

**Transaction ID : A-I225**

Amount of Each Receipt this Period  
**15**

Inkind: **staff health ins**

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

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**79439.97**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2012**

**Transaction ID : A-I258**

Amount of Each Receipt this Period  
**11.79**

Inkind: **in kind utilities**

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

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**79439.97**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2012**

**Transaction ID : A-I220**

Amount of Each Receipt this Period  
**7.16**

Inkind: **telephone**

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

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

**33.95**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 36
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Wayne Iverson**

Mailing Address PO Box 420697

City San Diego State CA Zip Code 92142-0697

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer Self Occupation Physician

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**79439.97**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 29 / 2012**

**Transaction ID : A-I228**

Amount of Each Receipt this Period  
**258.4**

Inkind: salary

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

Mailing Address PO Box 420697

City San Diego State CA Zip Code 92142-0697

FEC ID number of contributing federal political committee. **C H2CA52071**

Name of Employer Self Occupation Physician

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**79439.97**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 31 / 2012**

**Transaction ID : A-I230**

Amount of Each Receipt this Period  
**272**

Inkind: staff salary

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**530.40**

**1783.12**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 36
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Wayne Iverson**

Mailing Address **PO Box 420697**

City **San Diego** State **CA** Zip Code **92142-0697**

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

Name of Employer **Self** Occupation **Physician**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**79439.97**

Date of Receipt  
 /  /   
**03 / 21 / 2012**

**Transaction ID : A-L3**

Amount of Each Receipt this Period  
 **20000**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

Amount of Each Receipt this Period

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

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

**20000.00**

**20000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 36			
	<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. County of San Diego</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2012	
Mailing Address Ruffin Road			Amount of Each Disbursement this Period 1980	
City San Diego	State CA	Zip Code 92123	Transaction ID : B-E-196	
Purpose of Disbursement CANDIDATES STATEMENT FOR BALLO		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 03 / 31 / 2012	
Mailing Address PO Box 420697			Amount of Each Disbursement this Period 11.79	
City San Diego	State CA	Zip Code 92142-0697	Transaction ID : B-I-258	
Purpose of Disbursement Inkind: in kind utilities		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. Complete Campaigns</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2012	
Mailing Address Ruffin Road			Amount of Each Disbursement this Period 26.25	
City San Diego	State CA	Zip Code 92123	Transaction ID : B-E-138	
Purpose of Disbursement crt crd processing fee		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).....	2018.04
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 36			
	<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. Dr. Wayne Iverson</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 258.4
City San Diego	State CA	
Zip Code 92142-0697	Purpose of Disbursement Inkind: salary	Transaction ID : B-I-228
Candidate Name	Category/ Type	
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. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2012
Mailing Address Carmel Mtn Postal Store		Amount of Each Disbursement this Period 122
City San Diego	State CA	
Zip Code 92199-9709	Purpose of Disbursement bulk mailing postage	Transaction ID : B-E-240
Candidate Name	Category/ Type 001	
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. Dr. Wayne Iverson</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 254.15
City San Diego	State CA	
Zip Code 92142-0697	Purpose of Disbursement Inkind: staff salary	Transaction ID : B-I-227
Candidate Name	Category/ Type	
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).....	634.55
<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 18 OF 36			
	<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**

**A. Complete Campaigns**

Full Name (Last, First, Middle Initial)  
Mailing Address Ruffin Road

City San Diego State CA Zip Code 92123

Purpose of Disbursement credit card fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 06 / 2012

Amount of Each Disbursement this Period: 12.5

Transaction ID : B-E-251

Category/Type: 001

**B. Dr. Wayne Iverson**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 420697

City San Diego State CA Zip Code 92142-0697

Purpose of Disbursement Inkind: utilities

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 31 / 2012

Amount of Each Disbursement this Period: 11.2

Transaction ID : B-I-219

Category/Type:

**C. SECRETARY OF STATE**

Full Name (Last, First, Middle Initial)  
Mailing Address 1500 11th Street

City Sacramento State CA Zip Code 95814-5701

Purpose of Disbursement FILING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 22 / 2012

Amount of Each Disbursement this Period: 1641.4

Transaction ID : B-E-193

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... 1665.10

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 36			
	<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. Dr. Wayne Iverson</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 15 <b>Transaction ID : B-I-226</b>
City San Diego	State CA	
Zip Code 92142-0697	Purpose of Disbursement Inkind: Staff health insurance	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>B. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2012
Mailing Address Carmel Mtn Postal Store		Amount of Each Disbursement this Period 88 <b>Transaction ID : B-E-151</b>
City San Diego	State CA	
Zip Code 92199-9709	Purpose of Disbursement postage stamps	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. SIR SPEEDY</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2012
Mailing Address 7283 Engineer Road Suite G		Amount of Each Disbursement this Period 64.65 <b>Transaction ID : B-E-185</b>
City San Diego	State CA	
Zip Code 92111-1414	Purpose of Disbursement Administrative/Salary/Overhead: PRINTING	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	167.65
<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 20 OF 36			
	<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. V SHIRTS</b>		Date of Disbursement MM / DD / YYYY 02 / 13 / 2012
Mailing Address 8810C Jamacha Boulevard Suite 229		Amount of Each Disbursement this Period 301.7 <b>Transaction ID : B-E-191</b>
City Spring Valley	State CA Zip Code 91977-5633	
Purpose of Disbursement Administrative/Salary/Overhead: PRINTING		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. Complete Campaigns</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2012
Mailing Address Ruffin Road		Amount of Each Disbursement this Period 15 <b>Transaction ID : B-E-263</b>
City San Diego	State CA Zip Code 92123	
Purpose of Disbursement CREDIT CARD FEE		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. Postmaster</b>		Date of Disbursement MM / DD / YYYY 03 / 14 / 2012
Mailing Address Carmel Mtn Postal Store		Amount of Each Disbursement this Period 5.75 <b>Transaction ID : B-E-239</b>
City San Diego	State CA Zip Code 92199-9709	
Purpose of Disbursement Administrative/Salary/Overhead: postage		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).....	322.45
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 36			
	<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. V SHIRTS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2012
Mailing Address 8810C Jamacha Boulevard Suite 229		Amount of Each Disbursement this Period 226.28
City Spring Valley	State CA Zip Code 91977-5633	
Purpose of Disbursement printing t shirts	001	<b>Transaction ID : B-E-212</b>
Candidate Name	Category/Type	
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. SIR SPEEDY</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2012
Mailing Address 7283 Engineer Road Suite G		Amount of Each Disbursement this Period 246.6
City San Diego	State CA Zip Code 92111-1414	
Purpose of Disbursement Administrative/Salary/Overhead: PRINTING	001	<b>Transaction ID : B-E-192</b>
Candidate Name	Category/Type	
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. Complete Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2012
Mailing Address Ruffin Road		Amount of Each Disbursement this Period 20
City San Diego	State CA Zip Code 92123	
Purpose of Disbursement credit card fees	001	<b>Transaction ID : B-E-255</b>
Candidate Name	Category/Type	
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).....	492.88
<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 22 OF 36			
	<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. SIR SPEEDY</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2012
Mailing Address 7283 Engineer Road Suite G		Amount of Each Disbursement this Period 336.99
City San Diego	State CA Zip Code 92111-1414	
Purpose of Disbursement Advertising: signs	Category/Type 004	<b>Transaction ID : B-E-245</b>
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 02 / 29 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 15
City San Diego	State CA Zip Code 92142-0697	
Purpose of Disbursement Inkind: staff health ins	Category/Type	<b>Transaction ID : B-I-225</b>
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. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2012
Mailing Address Carmel Mtn Postal Store		Amount of Each Disbursement this Period 900
City San Diego	State CA Zip Code 92199-9709	
Purpose of Disbursement Administrative/Salary/Overhead: postage	Category/Type 001	<b>Transaction ID : B-E-247</b>
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).....	1251.99
<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 23 OF 36	
	<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**

**A. Complete Campaigns**

Full Name (Last, First, Middle Initial)  
Mailing Address Ruffin Road

City San Diego State CA Zip Code 92123

Purpose of Disbursement credit card processing fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 02 / 2012

Amount of Each Disbursement this Period: 250

Transaction ID : B-E-248

Category/Type: 001

**B. Dr. Wayne Iverson**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 420697

City San Diego State CA Zip Code 92142-0697

Purpose of Disbursement Inkind: rent

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 31 / 2012

Amount of Each Disbursement this Period: 302.35

Transaction ID : B-I-222

**c. Dr. Wayne Iverson**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 420697

City San Diego State CA Zip Code 92142-0697

Purpose of Disbursement Inkind: telephone

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 31 / 2012

Amount of Each Disbursement this Period: 6.96

Transaction ID : B-I-221

**SUBTOTAL** of Disbursements This Page (optional)..... 559.31

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 36		
	<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. Aristotle International</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2012
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 1680 <b>Transaction ID : B-E-183</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement complete campaigns software Candidate Name Category/Type 001	
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 02 / 29 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 302.35 <b>Transaction ID : B-I-223</b>
City San Diego State CA Zip Code 92142-0697	Purpose of Disbursement Inkind: rent Candidate Name Category/Type	
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. Complete Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2012
Mailing Address Ruffin Road		Amount of Each Disbursement this Period 17.5 <b>Transaction ID : B-E-262</b>
City San Diego State CA Zip Code 92123	Purpose of Disbursement credit card processing fee Candidate Name Category/Type 001	
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).....	1999.85
<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 25 OF 36			
	<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)  
**A. County of San Diego**

Mailing Address Ruffin Road

City San Diego State CA Zip Code 92123

Purpose of Disbursement Precinct map

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 04 / 2012

Amount of Each Disbursement this Period: 48.49

Transaction ID : B-E-133

Category/Type: 001

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

Mailing Address Carmel Mtn Postal Store

City San Diego State CA Zip Code 92199-9709

Purpose of Disbursement Administrative/Salary/Overhead: postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 23 / 2012

Amount of Each Disbursement this Period: 300

Transaction ID : B-E-242

Category/Type: 001

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

Mailing Address PO Box 790408

City Saint Louis State MO Zip Code 63179-0408

Purpose of Disbursement campaign materials

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 29 / 2012

Amount of Each Disbursement this Period: 1519.42

Transaction ID : B-E-246

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... 1867.91

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 36			
	<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. Complete Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2012
Mailing Address Ruffin Road		Amount of Each Disbursement this Period 3.25 <b>Transaction ID : B-E-257</b>
City San Diego State CA Zip Code 92123	Purpose of Disbursement credit card fees 001 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>B. Complete Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2012
Mailing Address Ruffin Road		Amount of Each Disbursement this Period 5.57 <b>Transaction ID : B-E-252</b>
City San Diego State CA Zip Code 92123	Purpose of Disbursement on line credit card fee 001 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. Phoenix Direct</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2012
Mailing Address 7243 Engineer Road Suite B		Amount of Each Disbursement this Period 385.5 <b>Transaction ID : B-E-244</b>
City San Diego State CA Zip Code 92111-1437	Purpose of Disbursement Advertising: direct mailing services 004 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	394.32
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 36	
	<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. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2012
Mailing Address Carmel Mtn Postal Store		Amount of Each Disbursement this Period 122 <b>Transaction ID : B-E-241</b>
City San Diego	State CA Zip Code 92199-9709	
Purpose of Disbursement bulk mailing postage	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 01 / 31 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 302.35 <b>Transaction ID : B-I-224</b>
City San Diego	State CA Zip Code 92142-0697	
Purpose of Disbursement Inkind: rent	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. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2012
Mailing Address Carmel Mtn Postal Store		Amount of Each Disbursement this Period 122 <b>Transaction ID : B-E-243</b>
City San Diego	State CA Zip Code 92199-9709	
Purpose of Disbursement bulk mailing postge	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).....	546.35
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 36	
	<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. Dr. Wayne Iverson</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 9.41 <b>Transaction ID : B-I-218</b>
City San Diego	State CA	
Zip Code 92142-0697	Purpose of Disbursement Inkind: utilities	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>B. Postmaster</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2012
Mailing Address Carmel Mtn Postal Store		Amount of Each Disbursement this Period 300 <b>Transaction ID : B-E-198</b>
City San Diego	State CA	
Zip Code 92199-9709	Purpose of Disbursement Administrative/Salary/Overhead: POSTAGE	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. Dr. Wayne Iverson</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 272 <b>Transaction ID : B-I-230</b>
City San Diego	State CA	
Zip Code 92142-0697	Purpose of Disbursement Inkind: staff salary	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	581.41
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 36			
	<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. SIR SPEEDY</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2012
Mailing Address 7283 Engineer Road Suite G		Amount of Each Disbursement this Period 310.14 <b>Transaction ID : B-E-197</b>
City San Diego State CA Zip Code 92111-1414	Purpose of Disbursement Administrative/Salary/Overhead: PRINTING 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. SIR SPEEDY</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2012
Mailing Address 7283 Engineer Road Suite G		Amount of Each Disbursement this Period 129.3 <b>Transaction ID : B-E-184</b>
City San Diego State CA Zip Code 92111-1414	Purpose of Disbursement Administrative/Salary/Overhead: printing 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. Dr. Wayne Iverson</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 7.16 <b>Transaction ID : B-I-220</b>
City San Diego State CA Zip Code 92142-0697	Purpose of Disbursement Inkind: telephone 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	446.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 36			
	<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. Steller Designs</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2012
Mailing Address 6886 Alderwood Drive		Amount of Each Disbursement this Period 40 <b>Transaction ID : B-E-195</b>
City Carlsbad	State CA	
Zip Code 92011-3905	Purpose of Disbursement MONTHLY MAINTENANCE	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. Postmaster</b>		Date of Disbursement MM / DD / YYYY 02 / 23 / 2012
Mailing Address Carmel Mtn Postal Store		Amount of Each Disbursement this Period 190 <b>Transaction ID : B-E-194</b>
City San Diego	State CA	
Zip Code 92199-9709	Purpose of Disbursement BULK MAILING PERMIT	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. Chase Card Services</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2012
Mailing Address PO Box 15298		Amount of Each Disbursement this Period 1694.95 <b>Transaction ID : B-E-190</b>
City Wilmington	State DE	
Zip Code 19850-5298	Purpose of Disbursement DR. DONS BUTTONS	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).....	1924.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 36			
	<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)  
**A. Steller Designs**

Mailing Address 6886 Alderwood Drive

City Carlsbad State CA Zip Code 92011-3905

Purpose of Disbursement  
WEB SITE MAINTENANCE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
02 / 02 / 2012

Amount of Each Disbursement this Period  
40

Transaction ID : B-E-189

Category/Type  
001

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

Mailing Address 6886 Alderwood Drive

City Carlsbad State CA Zip Code 92011-3905

Purpose of Disbursement  
Web design/maintenance

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
01 / 09 / 2012

Amount of Each Disbursement this Period  
40

Transaction ID : B-E-153

Category/Type  
001

Full Name (Last, First, Middle Initial)  
**c. Dr. Wayne Iverson**

Mailing Address PO Box 420697

City San Diego State CA Zip Code 92142-0697

Purpose of Disbursement  
Inkind: Staff Health Insurance

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
01 / 31 / 2012

Amount of Each Disbursement this Period  
15

Transaction ID : B-I-106

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 95.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 36			
	<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. Chase Card Services</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2012
Mailing Address PO Box 15298		Amount of Each Disbursement this Period 968
City Wilmington	State DE	Zip Code 19850-5298
Purpose of Disbursement Advertising: Press releases	Category/ Type 004	
Candidate Name	Transaction ID : B-E-154	
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. V SHIRTS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2012
Mailing Address 8810C Jamacha Boulevard Suite 229		Amount of Each Disbursement this Period 204.73
City Spring Valley	State CA	Zip Code 91977-5633
Purpose of Disbursement printing tshirts	Category/ Type 001	
Candidate Name	Transaction ID : B-E-211	
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).....	1172.73
<b>TOTAL</b> This Period (last page this line number only).....	16141.09

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 36	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" 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. Dr. Wayne Iverson</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2012
Mailing Address PO Box 420697		Amount of Each Disbursement this Period 6.97
City San Diego State CA Zip Code 92142-0697	Purpose of Disbursement telephone 001	
Candidate Name	Category/Type	<b>Transaction ID : B-I-259</b>  <b>[MEMO ITEM]</b> Inkind Donation Made
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.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L1

Wayne Iverson for Congress

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

[PERSONAL FUNDS]

Election: 2012

Dr. Wayne Iverson

Primary

General

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)

Yes

No

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

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

**SUBTOTALS** This Period This Page (optional)..... 5000.00

**TOTALS** 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.**