

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
The Hawkeye PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		16927.11
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	16927.11									
(c) Total Receipts (from Line 19)	87000.00	87000.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	103927.11	103927.11								
7. Total Disbursements (from Line 31)	48243.61	48243.61								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	55683.50	55683.50								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
The Hawkeye PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	6000.00	6000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	6000.00	6000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	81000.00	81000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	87000.00	87000.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	87000.00	87000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	87000.00	87000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	14243.61	14243.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	14243.61	14243.61
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	34000.00	34000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	48243.61	48243.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	48243.61	48243.61

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	87000.00	87000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	87000.00	87000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	14243.61	14243.61
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	14243.61	14243.61

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 23
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A.	Full Name (Last, First, Middle Initial) Aflac Inc. PAC	Date of Receipt MM / DD / YYYY 02 / 11 / 2009
	Mailing Address 1932 Wynton Road	Transaction ID: 90312.C1481
	City State Zip Code Columbus GA 31999	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C C00034157	Receipt
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

B.	Full Name (Last, First, Middle Initial) American Academy of Otolaryngology	Date of Receipt MM / DD / YYYY 06 / 29 / 2009
	Mailing Address Head & Neck Surgery, INC. (ENT PAC) 1650 Diagonal Rd	Transaction ID: 90714.C1510
	City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. C C00306449	Receipt
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00

C.	Full Name (Last, First, Middle Initial) American Association Of Nurse	Date of Receipt MM / DD / YYYY 06 / 08 / 2009
	Mailing Address Anesthetists Separate Segregated F 222 South Prospect Ave	Transaction ID: 90714.C1505
	City State Zip Code Park Ridge IL 60068	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C C00173153	Receipt
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional)	7500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 23
(check only one)

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

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A.

Full Name (Last, First, Middle Initial) American Association of Oral and		Date of Receipt MM / DD / YYYY 03 / 16 / 2009
Mailing Address Maxillofacial Surgery PAC 9700 West Bryn Mawr Ave		Transaction ID: 90324.C1487
City Des Plaines	State IL	Zip Code 60018
FEC ID number of contributing federal political committee. C C00005660		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

B.

Full Name (Last, First, Middle Initial) American Chiropractic Association PAC		Date of Receipt MM / DD / YYYY 04 / 27 / 2009
Mailing Address 1701 Clarendon Blvd		Transaction ID: 90714.C1498
City Arlington	State VA	Zip Code 22209
FEC ID number of contributing federal political committee. C C00102764		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

C.

Full Name (Last, First, Middle Initial) American College Of Cardiology PAC		Date of Receipt MM / DD / YYYY 06 / 16 / 2009
Mailing Address 2400 N Street, NW		Transaction ID: 90714.C1508
City Washington	State DC	Zip Code 20037-1153
FEC ID number of contributing federal political committee. C C00375360		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 23
(check only one)

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

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A.

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

Mailing Address 1111 14th Street Nw
Suite 1100

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 90324.C1488

Amount of Each Receipt this Period
2500.00

Receipt

B.

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

Mailing Address 325 Seventh Street Nw
Suite 700

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
02 / 23 / 2009

Transaction ID: 90312.C1484

Amount of Each Receipt this Period
2500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
American Optometric Association PAC

Mailing Address 1505 Prince Street
Suite 300

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
02 / 02 / 2009

Transaction ID: 90312.C1476

Amount of Each Receipt this Period
5000.00

Receipt

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 23
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A.	Full Name (Last, First, Middle Initial) American Podiatric Medical Association	Date of Receipt MM / DD / YYYY 02 / 05 / 2009
	Mailing Address Podiatry PAC 9312 Old Georgetown Road	Transaction ID: 90312.C1477
	City State Zip Code Bethesda MD 20814	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C C00008839	Receipt
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00

B.	Full Name (Last, First, Middle Initial) American Podiatric Medical Association	Date of Receipt MM / DD / YYYY 04 / 27 / 2009
	Mailing Address Podiatry PAC 9312 Old Georgetown Road	Transaction ID: 90714.C1495
	City State Zip Code Bethesda MD 20814	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C C00008839	Receipt
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

C.	Full Name (Last, First, Middle Initial) Amgen Inc. Political Action Committee	Date of Receipt MM / DD / YYYY 03 / 27 / 2009
	Mailing Address 555 13th Street; Ste. 600 West	Transaction ID: 90714.C1491
	City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C C00251876	Receipt
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

SUBTOTAL of Receipts This Page (optional)	10000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 23
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A.	Full Name (Last, First, Middle Initial) Blue Cross and Blue Shield Assoc. PAC	Date of Receipt MM / DD / YYYY 04 / 27 / 2009
	Mailing Address 1310 G Street Nw	Transaction ID: 90714.C1497
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C C00194746	Receipt
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00

B.	Full Name (Last, First, Middle Initial) Dealers Election Action Committee Of The	Date of Receipt MM / DD / YYYY 02 / 23 / 2009
	Mailing Address National Automotive Dealers Associ 8400 Westpark Drive	Transaction ID: 90312.C1482
	City State Zip Code Mclean VA 22102	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C C00040998	Receipt
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00

C.	Full Name (Last, First, Middle Initial) Federation of American Hospitals PAC	Date of Receipt MM / DD / YYYY 02 / 09 / 2009
	Mailing Address 801 Pennsylvania Ave, NW Ste 245	Transaction ID: 90312.C1478
	City State Zip Code Washington DC 20004-2604	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C C00002261	Receipt
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00

SUBTOTAL of Receipts This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

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

Mailing Address 801 Pennsylvania Ave, NW
Ste 245

City Washington State DC Zip Code 20004-2604

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt: 05 / 14 / 2009
Transaction ID: 90714.C1500
 Amount of Each Receipt this Period: 1000.00
 Receipt

B. Full Name (Last, First, Middle Initial)
FPL PAC Florida Power & Light Company

Mailing Address Employees PAC
700 Universe Blvd. - PO Box 14000

City Juno Beach State FL Zip Code 33408

FEC ID number of contributing federal political committee. **C** C00064774

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 02 / 23 / 2009
Transaction ID: 90312.C1483
 Amount of Each Receipt this Period: 5000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
General Electric Company PAC

Mailing Address 1299 Pennsylvania Ave Nw
Ste 1100

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 05 / 29 / 2009
Transaction ID: 90714.C1503
 Amount of Each Receipt this Period: 2000.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 8000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 23
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A.	Full Name (Last, First, Middle Initial) HCA Good Government Fund	Date of Receipt MM / DD / YYYY 04 / 03 / 2009
	Mailing Address PO Box 550 One Park Plaza	Transaction ID: 90714.C1494
	City Nashville State TN Zip Code 37203	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C C00067231	Receipt
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00	

B.	Full Name (Last, First, Middle Initial) HCA Good Government Fund	Date of Receipt MM / DD / YYYY 05 / 29 / 2009
	Mailing Address PO Box 550 One Park Plaza	Transaction ID: 90714.C1502
	City Nashville State TN Zip Code 37203	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C C00067231	Receipt
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3500.00	

C.	Full Name (Last, First, Middle Initial) Massachusetts Mutual Life Insurance	Date of Receipt MM / DD / YYYY 04 / 03 / 2009
	Mailing Address Company PAC 1295 State Street	Transaction ID: 90714.C1493
	City Springfield State MA Zip Code 01111	Amount of Each Receipt this Period 4000.00
	FEC ID number of contributing federal political committee. C C00118943	Receipt
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4000.00	

SUBTOTAL of Receipts This Page (optional)	7500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 23
(check only one)

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

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A. Full Name (Last, First, Middle Initial)
Midamerican Energy Company Executive PAC

Mailing Address 666 Grand Avenue
P.O. Box 657

City Des Moines State IA Zip Code 50303

FEC ID number of contributing federal political committee. **C** C00324483

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 05 / 29 / 2009
Transaction ID: 90714.C1501
Amount of Each Receipt this Period: 5000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Mortgage Bankers Assoc. Of America PAC

Mailing Address 1919 Pennsylvania Ave NW Fl 8
8th Floor

City Washington State DC Zip Code 20006-3404

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 06 / 26 / 2009
Transaction ID: 90714.C1509
Amount of Each Receipt this Period: 1000.00
Receipt

C. Full Name (Last, First, Middle Initial)
National Academy of Elder Law Attorneys

Mailing Address Senior Rights PAC
1577 Spring Hill Road

City Vienna State VA Zip Code 22182

FEC ID number of contributing federal political committee. **C** C00393553

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 05 / 11 / 2009
Transaction ID: 90714.C1499
Amount of Each Receipt this Period: 1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 7000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 23
(check only one)

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

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A.

Full Name (Last, First, Middle Initial)
New York Life Insurance Co. PAC

Mailing Address 51 Madison Avenue, Room 1109

City State Zip Code
New York NY 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 90312.C1486

Amount of Each Receipt this Period
3000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
New York Life Insurance Co. PAC

Mailing Address 51 Madison Avenue, Room 1109

City State Zip Code
New York NY 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 90324.C1489

Amount of Each Receipt this Period
2000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Northwestern Mutual Life Ins. Co. PAC

Mailing Address 720 E. Wisconsin Ave.

City State Zip Code
Milwaukee WI 53202

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 90714.C1492

Amount of Each Receipt this Period
3500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **8500.00**

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

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

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

FOR LINE NUMBER: PAGE 15 / 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A. Full Name (Last, First, Middle Initial)
Premier Employees Civic Action Fund
 Mailing Address 444 N Capitol St NW Ste 625
 City Washington State DC Zip Code 20001-1581
 FEC ID number of contributing federal political committee. **C** C00346288
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00
 Date of Receipt MM / DD / YYYY 06 / 08 / 2009
Transaction ID: 90714.C1507
 Amount of Each Receipt this Period 5000.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Principal Life Insurance Company PAC
 Mailing Address 711 High St
 City Des Moines State IA Zip Code 50392-0001
 FEC ID number of contributing federal political committee. **C** C00128918
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00
 Date of Receipt MM / DD / YYYY 05 / 26 / 2009
Transaction ID: 90714.C1504
 Amount of Each Receipt this Period 1000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
US Cuba Democracy PAC
 Mailing Address 1001 Brickell Bay Drive 9th Floor
 City Miami State FL Zip Code 33131
 FEC ID number of contributing federal political committee. **C** C00387720
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00
 Date of Receipt MM / DD / YYYY 01 / 05 / 2009
Transaction ID: 90130.C1475
 Amount of Each Receipt this Period 2500.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 8500.00
TOTAL This Period (last page this line number only) ► 81000.00

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

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

FOR LINE NUMBER: PAGE 16 / 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A. Full Name (Last, First, Middle Initial)
Blair G. Childs

Mailing Address 1885 Virginia Ave

City State Zip Code
Mc Lean VA 22101-4935

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

Name of Employer Advamed Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2009

Transaction ID: 90714.C1506

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Vernon A. Clark

Mailing Address PO Box 3385

City State Zip Code
Stateline NV 89449

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

Name of Employer Vern Clark & Associates Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 90312.C1485

Amount of Each Receipt this Period
5000.00

Receipt

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

Mailing Address 6414 Needle Leaf Dr.

City State Zip Code
Rockville MD 20852

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

Name of Employer Bksh And Associates Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
04 / 27 / 2009

Transaction ID: 90714.C1496

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **6000.00**

TOTAL This Period (last page this line number only) ▶ **6000.00**

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 / 23

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

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A.	Full Name (Last, First, Middle Initial) Aristotle International	Transaction ID: 90715.E704 Date of Disbursement
	Mailing Address 205 Pennsylvania Ave Se	<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20003-	Amount of Each Disbursement this Period
	Purpose of Disbursement software support Candidate Name	<input type="text" value="2400.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type SOFTWARE SUPPORT
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Behavioral Health Resources	Transaction ID: 90715.E699 Date of Disbursement
	Mailing Address 945 19th Street	<input type="text" value="02"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City Des Moines State IA Zip Code 50314-	Amount of Each Disbursement this Period
	Purpose of Disbursement charitable contribution Candidate Name	<input type="text" value="500.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type CHARITABLE CONTRIBUTION
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Capital Knowledge Consulting	Transaction ID: 90715.E698 Date of Disbursement
	Mailing Address PO Box 7255	<input type="text" value="02"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City Des Moines State IA Zip Code 50309-	Amount of Each Disbursement this Period
	Purpose of Disbursement bookkeeping Candidate Name	<input type="text" value="2175.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type BOOKKEEPING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5075.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 18 / 23

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

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A.	Full Name (Last, First, Middle Initial) Capital Knowledge Consulting	Transaction ID: 90715.E710 Date of Disbursement
	Mailing Address PO Box 7255	<input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2009"/>
	City Des Moines State IA Zip Code 50309-	Amount of Each Disbursement this Period
	Purpose of Disbursement bookkeeping	<input type="text" value="2775.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		BOOKKEEPING

B.	Full Name (Last, First, Middle Initial) Hoffman Consulting	Transaction ID: 90715.E697 Date of Disbursement
	Mailing Address 3905 Sylvian Avenue	<input type="text" value="02"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City Sioux City State IA Zip Code 51104-1325	Amount of Each Disbursement this Period
	Purpose of Disbursement generic fundraising fee	<input type="text" value="1400.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		GENERIC FUNDRAISING FEE

C.	Full Name (Last, First, Middle Initial) Hoffman Consulting	Transaction ID: 90715.E709 Date of Disbursement
	Mailing Address 3905 Sylvian Avenue	<input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City Sioux City State IA Zip Code 51104-1325	Amount of Each Disbursement this Period
	Purpose of Disbursement generic fundraising fee	<input type="text" value="3350.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		GENERIC FUNDRAISING FEE

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="7525.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 19 / 23

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

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A. Full Name (Last, First, Middle Initial) The Monocle Mailing Address 107 D Street, Ne City Washington State DC Zip Code 20002- Purpose of Disbursement generic catering costs Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E719 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 9
	Amount of Each Disbursement this Period 732.50 Category/Type GENERIC CATERING COSTS

B. Full Name (Last, First, Middle Initial) The Monocle Mailing Address 107 D Street, Ne City Washington State DC Zip Code 20002- Purpose of Disbursement generic catering costs Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E702 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 91.89 Category/Type GENERIC CATERING COSTS

C. Full Name (Last, First, Middle Initial) The Monocle Mailing Address 107 D Street, Ne City Washington State DC Zip Code 20002- Purpose of Disbursement generic catering costs Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E711 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 677.00 Category/Type GENERIC CATERING COSTS

SUBTOTAL of Disbursements This Page (optional) ▶	1501.39
TOTAL This Period (last page this line number only) ▶	14101.39

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 23

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

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A.	Full Name (Last, First, Middle Initial) Bennett Election Committee, Inc. Mailing Address 175 South West Temple, Ste 650 City Salt Lake City State UT Zip Code 84101- Purpose of Disbursement P-2010 Candidate Name ROBERT F BENNETT Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: UT District: 00	Transaction ID: 90715.E707 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 2500.00
B.	Full Name (Last, First, Middle Initial) The Richard Burr Committee Mailing Address Post Office Box 5928 City Winston-salem State NC Zip Code 27113- Purpose of Disbursement P-2010 Candidate Name RICHARD BURR COMMITTEE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 90715.E715 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 7 / 2 0 0 9	Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) The Richard Burr Committee Mailing Address Post Office Box 5928 City Winston-salem State NC Zip Code 27113- Purpose of Disbursement P-2010 Candidate Name RICHARD M BURR Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District: 00	Transaction ID: 90715.E706 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 2500.00

SUBTOTAL of Disbursements This Page (optional)		6000.00	
TOTAL This Period (last page this line number only)			

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

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

FOR LINE NUMBER:
(check only one)

PAGE 21 / 23

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

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A.	Full Name (Last, First, Middle Initial) Coburn for Senate 2010 Mailing Address PO Box 977 City Muskogee State OK Zip Code 74402- Purpose of Disbursement P-2010 Candidate Name THOMAS A COBURN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E714 Date of Disbursement 06 / 17 / 2009	Amount of Each Disbursement this Period 1000.00 P-2010
B.	Full Name (Last, First, Middle Initial) Lisa Murkowski for US Senate Mailing Address Po Box 100847 City Anchorage State AK Zip Code 99510- Purpose of Disbursement P-2010 Candidate Name LISA MURKOWSKI Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E717 Date of Disbursement 06 / 23 / 2009	Amount of Each Disbursement this Period 2500.00 P-2010
C.	Full Name (Last, First, Middle Initial) Portman for Senate Committee Mailing Address 8331 Little Harbor Drive City Cincinnati State OH Zip Code 45244- Purpose of Disbursement P-2010 Candidate Name ROB PORTMAN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90715.E718 Date of Disbursement 06 / 24 / 2009	Amount of Each Disbursement this Period 1000.00 P-2010

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A.	Full Name (Last, First, Middle Initial) Friends of John Thune Mailing Address 200 North Phillips Avenue, Ste L10 City Sioux Falls State SD Zip Code 57104- Purpose of Disbursement P-2010 Candidate Name JOHN THUNE Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: SD District: 00	Transaction ID: 90715.E716 Date of Disbursement 06 / 23 / 2009 Amount of Each Disbursement this Period 2500.00 P-2010
B.	Full Name (Last, First, Middle Initial) Friends of John Thune Mailing Address 200 North Phillips Avenue, Ste L10 City Sioux Falls State SD Zip Code 57104- Purpose of Disbursement P-2010 Candidate Name JOHN THUNE Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: SD District: 00	Transaction ID: 90715.E708 Date of Disbursement 03 / 31 / 2009 Amount of Each Disbursement this Period 2500.00 P-2010
C.	Full Name (Last, First, Middle Initial) Coleman Minnesota Recount Committee Mailing Address PO Box 14483 City Saint Paul State MN Zip Code 55144- Purpose of Disbursement 2008 GENERAL Candidate Name NORM COLEMAN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: MN District: 00 Other	Transaction ID: 90715.E695 Date of Disbursement 01 / 29 / 2009 Amount of Each Disbursement this Period 1000.00 2008 GENERAL

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶	(Empty box for total)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 23 / 23

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

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A. Full Name (Last, First, Middle Initial)
National Republican Senatorial Committee

Mailing Address 425 Second Street Ne

City Washington State DC Zip Code 20002-

Purpose of Disbursement
2009 CONTRIBUTION

Candidate Name
NATIONAL REPUBLICAN SENATORIAL COMMITTEE

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼
Other

Transaction ID: 90715.E705
Date of Disbursement

03 / 26 / 2009

Amount of Each Disbursement this Period

15000.00

2009 CONTRIBUTION

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

Mailing Address 621 East Locust

City Des Moines State IA Zip Code 50309-

Purpose of Disbursement
2009 CONTRIBUTION

Candidate Name
REPUBLICAN PARTY OF IOWA

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼
Other

Transaction ID: 90715.E712
Date of Disbursement

05 / 08 / 2009

Amount of Each Disbursement this Period

2500.00

2009 CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

17500.00

TOTAL This Period (last page this line number only)

34000.00