FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE
15 APR 13 AM 10: 44
Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5

Braley for Iowa

ADDRESS (number and street) ▼ 2813 Virginia Place

☒ Check if different than previously reported. (ACC)

Des Moines | IA | 50321 -

2. **FEC IDENTIFICATION NUMBER ▼** C C00541417

CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ AMENDED (A)

STATE ▼ DISTRICT IA 00

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- ☒ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ Termination Report (TER)

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

☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Convention (12C) ☐ Special (12S)

Election on M M / D D / Y Y Y Y in the State of

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

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

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 01 / 01 / 2015 through 03 / 31 / 2015

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 Theresa L Kehoe

Signature of Treasurer *Theresa L Kehoe* Date 04 / 12 / 2015

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							

15020126776

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Braley for Iowa

Report Covering the Period: From: 01 / 01 / 2015 To: 03 / 31 / 2015

	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)) ...	832.80	8640.20
(b) Total Contribution Refunds (from Line 20(d)) ..	37.00	855.65
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	795.80	7784.55
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	214615.65	329796.42
(b) Total Offsets to Operating Expenditures (from Line 14)...	23084.18	24992.23
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	191531.47	304804.19
8. Cash on Hand at Close of Reporting Period (from Line 27)...	1735.03	
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) ...	65464.46	

For further information contact:

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

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

15020126777

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3** (Revised 12/2003)

Write or Type Committee Name

Braley for Iowa

Report Covering the Period: From: M M 01 / D D 01 / Y Y Y Y 2015 To: M M 03 / D D 31 / Y Y Y Y 2015

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)...	0.00	7511490.66
(ii) Unitemized.....	832.80	1794632.39
(iii) TOTAL of contributions from individuals . ▶	832.80	7251.57
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	1388.63
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))...	832.80	8640.20
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES..	0.00	37634.21
13. LOANS: (a) Made or Guaranteed by the Candidate...	0.00	0.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)..	23084.18	24992.23
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	177817.60	177817.60
16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)... ▶	201734.58	249084.24

15020126778

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	214615.65	329796.42
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES...	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees...	37.00	855.65
(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 20(a), (b), and (c))...	37.00	855.65
21. OTHER DISBURSEMENTS...	0.00	0.00
22. **TOTAL DISBURSEMENTS** (add Lines 17, 18, 19(c), 20(d), and 21) ▶	214652.65	330652.07

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	14653.10
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	201734.58
25. SUBTOTAL (add Line 23 and Line 24)...	216387.68
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	214652.65
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	1735.03

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)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 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)
Braley for Iowa

A.
Full Name (Last, First, Middle Initial): David Binder Research
Mailing Address: 44 Page St #404
City: San Francisco | State: CA | Zip Code: 94102
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)
Election Cycle-to-Date: 17684.58
Date of Receipt: 03 / 23 / 2015
Transaction ID : C10546930
Amount of Each Receipt this Period: 17684.58
reimbursement

B.
Full Name (Last, First, Middle Initial): Delta Dental
Mailing Address: PO Box 9000
City: Johnston | State: IA | Zip Code: 50131
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)
Election Cycle-to-Date: 223.70
Date of Receipt: 02 / 02 / 2015
Transaction ID : C10546931
Amount of Each Receipt this Period: 223.70
reimb health care

C.
Full Name (Last, First, Middle Initial): Jake Oeth
Mailing Address: 300 Walnut #125
City: Des Moines | State: IA | Zip Code: 50309
FEC ID number of contributing federal political committee: C
Name of Employer: Braley for Iowa
Occupation: Political Director
Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)
Election Cycle-to-Date: 703.82
Date of Receipt: 01 / 29 / 2015
Transaction ID : C10527212
Amount of Each Receipt this Period: 351.91
health care payment

SUBTOTAL of Receipts This Page (optional) 18260.19

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

15020126780

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)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Braley for Iowa

A.
Full Name (Last, First, Middle Initial): Shorr Johnson Magnus
Mailing Address: 100 N 20th St #201
City: Philadelphia | State: PA | Zip Code: 19103
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)
Election Cycle-to-Date: 4265.00

Date of Receipt: 01 / 29 / 2015
Transaction ID : C10527213
Amount of Each Receipt this Period: 4265.00
refund media buy

B.
Full Name (Last, First, Middle Initial): Sarah R Benzing
Mailing Address: 1821 Woodland Ave Apt 2
City: Des Moines | State: IA | Zip Code: 50309
FEC ID number of contributing federal political committee: C
Name of Employer: Braley for Iowa
Occupation: Manager
Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)
Election Cycle-to-Date: 1223.14

Date of Receipt: 01 / 31 / 2015
Transaction ID : C10527574
Amount of Each Receipt this Period: 408.00
Health care payment

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
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) 4673.00

TOTAL This Period (last page this line number only) 22933.19

15020172871

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)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)
Braley for Iowa

A.
Full Name (Last, First, Middle Initial)
NEXTGEN CLIMATE ACTION COMMITTEE

Mailing Address 700 13TH STREET, NW
SUITE 600

City: WASHINGTON
State: DC
Zip Code: 20005

FEC ID number of contributing federal political committee.: C C00547349

Name of Employer:
Occupation:

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date: 177817.60

Date of Receipt: M M 02 / D D 18 / Y Y Y Y 2015

Transaction ID : C10536414

Amount of Each Receipt this Period: 177817.60

list purchase

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

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

Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) 177817.60

TOTAL This Period (last page this line number only) 177817.60

15020126782

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Braley for Iowa

A. Full Name (Last, First, Middle Initial)
Carter Printing

Mailing Address 1739 E. Grand Avenue

City: Des Moines State: IA Zip Code: 50316

Purpose of Disbursement: printing expense

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 01 / 30 / 2015

Amount of Each Disbursement this Period: 1336.66

Transaction ID : D521496

B. Full Name (Last, First, Middle Initial)
Carter Printing

Mailing Address 1739 E. Grand Avenue

City: Des Moines State: IA Zip Code: 50316

Purpose of Disbursement: printing

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 01 / 30 / 2015

Amount of Each Disbursement this Period: 46.80

Transaction ID : D521593

C. Full Name (Last, First, Middle Initial)
Gold Standard, LLC

Mailing Address 426 C St NE

City: Washington State: DC Zip Code: 20002

Purpose of Disbursement: fundraising consulting

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 03 / 24 / 2015

Amount of Each Disbursement this Period: 8000.00

Transaction ID : D521538

SUBTOTAL of Disbursements This Page (optional) 9383.46

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

15020126785

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Braley for Iowa

A. Full Name (Last, First, Middle Initial)
Molly M Scherrman

Mailing Address 641 19th Street, Apt 1

City: Des Moines | State: IA | Zip Code: 50314

Purpose of Disbursement: phone expense

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 03 / 24 / 2015

Amount of Each Disbursement this Period: 932.83

Transaction ID : D521543

B. Full Name (Last, First, Middle Initial)
Molly M Scherrman

Mailing Address 641 19th Street, Apt 1

City: Des Moines | State: IA | Zip Code: 50314

Purpose of Disbursement: mileage

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 03 / 24 / 2015

Amount of Each Disbursement this Period: 99.06

Transaction ID : D521544

C. Full Name (Last, First, Middle Initial)
New Partners Teleservices

Mailing Address PO Box 251157

City: Saint Paul | State: MN | Zip Code: 55125

Purpose of Disbursement: fundraising exp

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 02 / 25 / 2015

Amount of Each Disbursement this Period: 2995.19

Transaction ID : D521548

SUBTOTAL of Disbursements This Page (optional) 4027.08

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

15020126784

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Braley for Iowa

A. Full Name (Last, First, Middle Initial): Act Blue
Mailing Address: P.O. BOX 441146
City: SOMERVILLE State: MA Zip Code: 02144
Purpose of Disbursement: credit card processing fees
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 01 / 02 / 2015
Amount of Each Disbursement this Period: 4.00
Transaction ID : D521508

B. Full Name (Last, First, Middle Initial): Act Blue
Mailing Address: P.O. BOX 441146
City: SOMERVILLE State: MA Zip Code: 02144
Purpose of Disbursement: credit card processing fees
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 01 / 06 / 2015
Amount of Each Disbursement this Period: 9.90
Transaction ID : D521509

C. Full Name (Last, First, Middle Initial): Act Blue
Mailing Address: P.O. BOX 441146
City: SOMERVILLE State: MA Zip Code: 02144
Purpose of Disbursement: credit card processing fees
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 01 / 16 / 2015
Amount of Each Disbursement this Period: 12.48
Transaction ID : D521510

SUBTOTAL of Disbursements This Page (optional) 26.38

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

15020127785

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Braley for Iowa

A. Full Name (Last, First, Middle Initial): Act Blue
Mailing Address: P.O. BOX 441146
City: SOMERVILLE State: MA Zip Code: 02144
Purpose of Disbursement: credit card processing fees
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 01 / 17 / 2015
Amount of Each Disbursement this Period: 1.44
Transaction ID : D521511

B. Full Name (Last, First, Middle Initial): Act Blue
Mailing Address: P.O. BOX 441146
City: SOMERVILLE State: MA Zip Code: 02144
Purpose of Disbursement: credit card processing fees
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 03 / 24 / 2015
Amount of Each Disbursement this Period: 129.12
Transaction ID : D521512

C. Full Name (Last, First, Middle Initial): United States Treasury
Mailing Address: 5800 E Bannister Rd
City: Kansas City State: MO Zip Code: 64134-1192
Purpose of Disbursement: 1120POL taxes, income tax on interest
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 02 / 21 / 2015
Amount of Each Disbursement this Period: 958.00
Transaction ID : D521502

SUBTOTAL of Disbursements This Page (optional) 1088.56

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

15020126788

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Braley for Iowa

A. Full Name (Last, First, Middle Initial)
Cardmember Services

Mailing Address PO Box 790408

City: St Louis | State: MO | Zip Code: 63179

Purpose of Disbursement: travel expense, airfare

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 02 / 19 / 2015

Amount of Each Disbursement this Period: 450.10

Transaction ID : D521549

B. Full Name (Last, First, Middle Initial)
Leah Israel, Inc.

Mailing Address 1470 W Carmen Ave #501

City: Chicago | State: IL | Zip Code: 60640

Purpose of Disbursement: catering exp

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 03 / 24 / 2015

Amount of Each Disbursement this Period: 961.20

Transaction ID : D521551

C. Full Name (Last, First, Middle Initial)
Leah Israel, Inc.

Mailing Address 1470 W Carmen Ave #501

City: Chicago | State: IL | Zip Code: 60640

Purpose of Disbursement: fundraising consultant exp.

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 03 / 24 / 2015

Amount of Each Disbursement this Period: 500.00

Transaction ID : D521552

SUBTOTAL of Disbursements This Page (optional) 1911.30

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

15020127787

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Braley for Iowa

A. Full Name (Last, First, Middle Initial)
Moritz Photography

Mailing Address 1700 York Ave Suite 4G

City: New York | State: NY | Zip Code: 10128

Purpose of Disbursement: photo/site exp. for fundraising

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 03 / 24 / 2015

Amount of Each Disbursement this Period: 500.00

Transaction ID : D521553

B. Full Name (Last, First, Middle Initial)
Zambrana Productions Inc.

Mailing Address PO Box 2022

City: Long Island City | State: NY | Zip Code: 11102

Purpose of Disbursement: fundraising site expenses

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 03 / 24 / 2015

Amount of Each Disbursement this Period: 2970.23

Transaction ID : D521554

C. Full Name (Last, First, Middle Initial)
Erika J. Barrera

Mailing Address 3602 S 14th St
Apt 208

City: Alexandria | State: VA | Zip Code: 22302-1072

Purpose of Disbursement: travel airfare

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 02 / 19 / 2015

Amount of Each Disbursement this Period: 25.00

Transaction ID : D521505

SUBTOTAL of Disbursements This Page (optional) 3495.23

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

15020127788

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Braley for Iowa

A. Full Name (Last, First, Middle Initial)
Erika J. Barrera

Mailing Address 3602 S 14th St
Apt 208

City: Alexandria State: VA Zip Code: 22302-1072

Purpose of Disbursement: travel, cab, and gas exp.

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 02 / 19 / 2015

Amount of Each Disbursement this Period: 32.98

Transaction ID : D521506

B. Full Name (Last, First, Middle Initial)
Erika J. Barrera

Mailing Address 3602 S 14th St
Apt 208

City: Alexandria State: VA Zip Code: 22302-1072

Purpose of Disbursement: travel meal exp

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 02 / 21 / 2015

Amount of Each Disbursement this Period: 17.44

Transaction ID : D521507

C. Full Name (Last, First, Middle Initial)
Link Strategies

Mailing Address 321 E Walnut #321

City: Des Monies State: IA Zip Code: 50309

Purpose of Disbursement: strategic planning consulting

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 03 / 31 / 2015

Amount of Each Disbursement this Period: 20000.00

Transaction ID : D521515

SUBTOTAL of Disbursements This Page (optional) 20050.42

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

15020127828

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Braley for Iowa

A. Full Name (Last, First, Middle Initial): Wellmark
Mailing Address: PO Box 10353
City: Des Moines State: IA Zip Code: 50306
Purpose of Disbursement: health care
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 01 / 24 / 2015
Amount of Each Disbursement this Period: 1077.48
Transaction ID : D521516

B. Full Name (Last, First, Middle Initial): Wellmark
Mailing Address: PO Box 10353
City: Des Moines State: IA Zip Code: 50306
Purpose of Disbursement: health care
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 02 / 28 / 2015
Amount of Each Disbursement this Period: 365.02
Transaction ID : D521517

C. Full Name (Last, First, Middle Initial): Wellmark
Mailing Address: PO Box 10353
City: Des Moines State: IA Zip Code: 50306
Purpose of Disbursement: health care
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 03 / 15 / 2015
Amount of Each Disbursement this Period: 18.38
Transaction ID : D521518

SUBTOTAL of Disbursements This Page (optional) 1460.88

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

15020126790

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Braley for Iowa

A. Full Name (Last, First, Middle Initial)
Analytics Media Group

Mailing Address 321 E Walnut #321

City: Des Moines State: IA Zip Code: 50309

Purpose of Disbursement: media expense

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 02 / 19 / 2015

Amount of Each Disbursement this Period: 25000.00

Transaction ID : D521546

B. Full Name (Last, First, Middle Initial)
Hart Research Associates

Mailing Address 1724 Conn Ave NW

City: Washington State: DC Zip Code: 20009

Purpose of Disbursement: polling exp

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 02 / 21 / 2015

Amount of Each Disbursement this Period: 9867.00

Transaction ID : D521547

C. Full Name (Last, First, Middle Initial)
Merchant Services

Mailing Address PO Box 6600

City: Hagerstown State: MD Zip Code: 21740

Purpose of Disbursement: credit card processing fees

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 01 / 05 / 2015

Amount of Each Disbursement this Period: 287.89

Transaction ID : D521533

SUBTOTAL of Disbursements This Page (optional) 35154.89

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

15020172791

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Braley for Iowa

A. Full Name (Last, First, Middle Initial)
Merchant Services

Mailing Address PO Box 6600

City: Hagerstown State: MD Zip Code: 21740

Purpose of Disbursement: credit card processing fees

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 02 / 04 / 2015

Amount of Each Disbursement this Period: 39.90

Transaction ID : D521534

B. Full Name (Last, First, Middle Initial)
Merchant Services

Mailing Address PO Box 6600

City: Hagerstown State: MD Zip Code: 21740

Purpose of Disbursement: credit card processing fees

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 03 / 04 / 2015

Amount of Each Disbursement this Period: 39.90

Transaction ID : D521535

C. Full Name (Last, First, Middle Initial)
Lanon Baccam

Mailing Address 1222 Half Street SW

City: Washington State: DC Zip Code: 20024

Purpose of Disbursement: travel exp., airfare

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 03 / 31 / 2015

Amount of Each Disbursement this Period: 279.20

Transaction ID : D521540

SUBTOTAL of Disbursements This Page (optional) 359.00

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

15020127592

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Braley for Iowa

A. Full Name (Last, First, Middle Initial)
Lanon Baccam

Mailing Address 1222 Half Street SW

City: Washington | State: DC | Zip Code: 20024

Purpose of Disbursement: travel exp., car rental

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 03 / 31 / 2015

Amount of Each Disbursement this Period: 251.50

Transaction ID : D521541

B. Full Name (Last, First, Middle Initial)
Lanon Baccam

Mailing Address 1222 Half Street SW

City: Washington | State: DC | Zip Code: 20024

Purpose of Disbursement: fundraising consulting exp.

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 03 / 31 / 2015

Amount of Each Disbursement this Period: 250.00

Transaction ID : D521542

C. Full Name (Last, First, Middle Initial)
NGP VAN, Inc

Mailing Address 1101 15th St NW #500

City: Washington | State: DC | Zip Code: 20005

Purpose of Disbursement: online database expenses

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 01 / 14 / 2015

Amount of Each Disbursement this Period: 300.00

Transaction ID : D521513

SUBTOTAL of Disbursements This Page (optional) 801.50

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

15020125795

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Braley for Iowa

A. Full Name (Last, First, Middle Initial)
NGP VAN, Inc

Mailing Address 1101 15th St NW #500

City: Washington | State: DC | Zip Code: 20005

Purpose of Disbursement: online database expenses

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 01 / 16 / 2015

Amount of Each Disbursement this Period: 1350.00

Transaction ID : D521514

B. Full Name (Last, First, Middle Initial)
David Binder Research

Mailing Address 44 Page St #404

City: San Francisco | State: CA | Zip Code: 94102

Purpose of Disbursement: research expenses

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 02 / 21 / 2015

Amount of Each Disbursement this Period: 15433.33

Transaction ID : D521536

C. Full Name (Last, First, Middle Initial)
David Binder Research

Mailing Address 44 Page St #404

City: San Francisco | State: CA | Zip Code: 94102

Purpose of Disbursement: research expenses

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 02 / 25 / 2015

Amount of Each Disbursement this Period: 48551.25

Transaction ID : D521537

SUBTOTAL of Disbursements This Page (optional) 65334.58

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

15020126794

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Braley for Iowa

A. Full Name (Last, First, Middle Initial)
Freeman Decorating

Mailing Address PO Box 650036

City: Dallas | State: TX | Zip Code: 75265

Purpose of Disbursement: site expenses for event

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 02 / 04 / 2015

Amount of Each Disbursement this Period: 834.22

Transaction ID : D521527

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

Mailing Address PO Box 2314

City: Carol Stream | State: IL | Zip Code: 60132

Purpose of Disbursement: research expenses

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 02 / 19 / 2015

Amount of Each Disbursement this Period: 3038.00

Transaction ID : D521529

C. Full Name (Last, First, Middle Initial)
Perkins Coie

Mailing Address Suite 4900 1201 3rd Ave

City: Seattle | State: WA | Zip Code: 98101

Purpose of Disbursement: legal services

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 02 / 19 / 2015

Amount of Each Disbursement this Period: 11790.00

Transaction ID : D521530

SUBTOTAL of Disbursements This Page (optional) 15662.22

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

15020126795

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Braley for Iowa

A. Full Name (Last, First, Middle Initial)
Perkins Coie

Mailing Address Suite 4900 1201 3rd Ave

City: Seattle State: WA Zip Code: 98101

Purpose of Disbursement: legal services

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 03 / 24 / 2015

Amount of Each Disbursement this Period: 601.50

Transaction ID : D521531

B. Full Name (Last, First, Middle Initial)
Perkins Coie

Mailing Address Suite 4900 1201 3rd Ave

City: Seattle State: WA Zip Code: 98101

Purpose of Disbursement: legal services

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 02 / 19 / 2015

Amount of Each Disbursement this Period: 6599.63

Transaction ID : D521586

C. Full Name (Last, First, Middle Initial)
Perkins Coie

Mailing Address Suite 4900 1201 3rd Ave

City: Seattle State: WA Zip Code: 98101

Purpose of Disbursement: legal services

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 03 / 24 / 2015

Amount of Each Disbursement this Period: 135.00

Transaction ID : D521587

SUBTOTAL of Disbursements This Page (optional) 7336.13

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

15020126759

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Braley for Iowa

A. Full Name (Last, First, Middle Initial)
Garner Printing

Mailing Address 1697 NE 53rd St Des Moines, Iowa

City: Des Moines | State: IA | Zip Code: 50313

Purpose of Disbursement: printing sign exp.

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 01 / 31 / 2015

Amount of Each Disbursement this Period: 2468.22

Transaction ID : D521500

B. Full Name (Last, First, Middle Initial)
Garner Printing

Mailing Address 1697 NE 53rd St Des Moines, Iowa

City: Des Moines | State: IA | Zip Code: 50313

Purpose of Disbursement: printing sign exp.

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 02 / 26 / 2015

Amount of Each Disbursement this Period: 868.14

Transaction ID : D521501

C. Full Name (Last, First, Middle Initial)
Beth Foster Consultants LLC

Mailing Address 2102 W 49th St

City: Minneapolis | State: MN | Zip Code: 55419

Purpose of Disbursement: direct mail consultant

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 02 / 19 / 2015

Amount of Each Disbursement this Period: 5000.00

Transaction ID : D521519

SUBTOTAL of Disbursements This Page (optional) 8336.36

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

15020125797

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)

[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Braley for Iowa

A. Full Name (Last, First, Middle Initial)
Blue State Digital

Mailing Address 406 7th St NW

City: Washington | State: DC | Zip Code: 20004

Purpose of Disbursement: computer technology fees

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 02 / 19 / 2015

Amount of Each Disbursement this Period: 1873.85

Transaction ID : D521520

B. Full Name (Last, First, Middle Initial)
Blue State Digital

Mailing Address 406 7th St NW

City: Washington | State: DC | Zip Code: 20004

Purpose of Disbursement: computer technology fees

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 02 / 21 / 2015

Amount of Each Disbursement this Period: 1450.35

Transaction ID : D521521

C. Full Name (Last, First, Middle Initial)
Blue State Digital

Mailing Address 406 7th St NW

City: Washington | State: DC | Zip Code: 20004

Purpose of Disbursement: computer technology fees

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 03 / 24 / 2015

Amount of Each Disbursement this Period: 2619.35

Transaction ID : D521522

SUBTOTAL of Disbursements This Page (optional) 5943.55

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

15020126798

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Braley for Iowa

A. Full Name (Last, First, Middle Initial)
Blue State Digital

Mailing Address 406 7th St NW

City: Washington | State: DC | Zip Code: 20004

Purpose of Disbursement: computer technology fees

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 02 / 19 / 2015

Amount of Each Disbursement this Period: 1487.80

Transaction ID : D521588

B. Full Name (Last, First, Middle Initial)
Blue State Digital

Mailing Address 406 7th St NW

City: Washington | State: DC | Zip Code: 20004

Purpose of Disbursement: computer technology fees

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 02 / 19 / 2015

Amount of Each Disbursement this Period: 1604.70

Transaction ID : D521589

C. Full Name (Last, First, Middle Initial)
Delta Dental

Mailing Address PO Box 9000

City: Johnston | State: IA | Zip Code: 50131

Purpose of Disbursement: health care

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[ ] Primary [X] General
[ ] Other (specify)

Date of Disbursement: 01 / 02 / 2015

Amount of Each Disbursement this Period: 540.70

Transaction ID : D521523

SUBTOTAL of Disbursements This Page (optional) 3633.20

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

15020126759

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)

[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Braley for Iowa

A. Full Name (Last, First, Middle Initial)
Delta Dental

Mailing Address PO Box 9000

City: Johnston State: IA Zip Code: 50131

Purpose of Disbursement: health care

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 03 / 04 / 2015

Amount of Each Disbursement this Period: 158.50

Transaction ID : D521524

B. Full Name (Last, First, Middle Initial)
Well & Lighthouse, LLC

Mailing Address 1244 19th St NW

City: Washington State: DC Zip Code: 20036

Purpose of Disbursement: digital media

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 02 / 21 / 2015

Amount of Each Disbursement this Period: 19782.44

Transaction ID : D521526

C. Full Name (Last, First, Middle Initial)
Well & Lighthouse, LLC

Mailing Address 1244 19th St NW

City: Washington State: DC Zip Code: 20036

Purpose of Disbursement: fundraising consulting fees

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 02 / 21 / 2015

Amount of Each Disbursement this Period: 10000.00

Transaction ID : D521590

SUBTOTAL of Disbursements This Page (optional) 29940.94

TOTAL This Period (last page this line number only) 213945.68

15020126800

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) ☐ 9 ☒ 10

NAME OF COMMITTEE (In Full)
Braley for Iowa

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Carter Printing

Nature of Debt (Purpose): printing

Mailing Address 1739 E. Grand Avenue

City Des Moines State IA Zip Code 50316

Outstanding Balance Beginning This Period: 1336.66

Transaction ID : D512087

Amount Incurred This Period: 0.00

Payment This Period: 1336.66

Outstanding Balance at Close of This Period: 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
New Partners Teleservices

Nature of Debt (Purpose): fundraising exp

Mailing Address PO Box 251157

City Saint Paul State MN Zip Code 55125

Outstanding Balance Beginning This Period: 2995.19

Transaction ID : D512095

Amount Incurred This Period: 0.00

Payment This Period: 2995.19

Outstanding Balance at Close of This Period: 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Analytics Media Group

Nature of Debt (Purpose): media exp

Mailing Address 321 E Walnut #321

City Des Moines State IA Zip Code 50309

Outstanding Balance Beginning This Period: 25000.00

Transaction ID : D512098

Amount Incurred This Period: 0.00

Payment This Period: 25000.00

Outstanding Balance at Close of This Period: 0.00

1) **SUBTOTALS** This Period This Page (optional) ... ▶	0.00
2) **TOTALS** This Period (last page this line number only) ... ▶	
3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)... ▶	
4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) ☐ 9 ☒ 10

NAME OF COMMITTEE (In Full)
Braley for Iowa

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LexisNexis

Nature of Debt (Purpose): research expenses

Mailing Address PO Box 2314

City Carol Stream State Zip Code IL 60132

Outstanding Balance Beginning This Period: 3038.00

Transaction ID : D512089

Amount Incurred This Period: 0.00

Payment This Period: 3038.00

Outstanding Balance at Close of This Period: 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Perkins Coie

Nature of Debt (Purpose): legal services

Mailing Address Suite 4900 1201 3rd Ave

City Seattle State Zip Code WA 98101

Outstanding Balance Beginning This Period: 6599.63

Transaction ID : D507805

Amount Incurred This Period: 0.00

Payment This Period: 6599.63

Outstanding Balance at Close of This Period: 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Perkins Coie

Nature of Debt (Purpose): legal services

Mailing Address Suite 4900 1201 3rd Ave

City Seattle State WA Zip Code 98101

Outstanding Balance Beginning This Period: 11790.00

Transaction ID : D512096

Amount Incurred This Period: 0.00

Payment This Period: 11790.00

Outstanding Balance at Close of This Period: 0.00

1) **SUBTOTALS** This Period This Page (optional) ... ▶	0.00
2) **TOTALS** This Period (last page this line number only) ... ▶	
3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)... ▶	
4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)
- [ ] 9
- [x] 10

NAME OF COMMITTEE (In Full)

Braley for Iowa

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Perkins Coie

Nature of Debt (Purpose): legal services

Mailing Address Suite 4900 1201 3rd Ave

City: Seattle State: WA Zip Code: 98101

Transaction ID : D512097

Outstanding Balance Beginning This Period: 601.50

Amount Incurred This Period: 0.00

Payment This Period: 601.50

Outstanding Balance at Close of This Period: 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Garner Printing

Nature of Debt (Purpose): printing

Mailing Address 1697 NE 53rd St Des Moines, Iowa

City: Des Moines State: IA Zip Code: 50313

Transaction ID : D512088

Outstanding Balance Beginning This Period: 2468.22

Amount Incurred This Period: 0.00

Payment This Period: 2468.22

Outstanding Balance at Close of This Period: 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Beth Foster Consultants LLC

Nature of Debt (Purpose): fundraising consultant

Mailing Address 2102 W 49th St

City: Minneapolis State: MN Zip Code: 55419

Transaction ID : D508224

Outstanding Balance Beginning This Period: 5000.00

Amount Incurred This Period: 0.00

Payment This Period: 5000.00

Outstanding Balance at Close of This Period: 0.00

1) **SUBTOTALS** This Period This Page (optional) ... ▶	0.00
2) **TOTALS** This Period (last page this line number only) ... ▶	
3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)... ▶	
4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶	

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SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) ☐ 9 ☒ 10

NAME OF COMMITTEE (In Full)

Braley for Iowa

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blue State Digital

Nature of Debt (Purpose): computer technology fees

Mailing Address 406 7th St NW

City Washington State DC Zip Code 20004

Outstanding Balance Beginning This Period: 1873.85

Transaction ID : D507806

Amount Incurred This Period: 0.00

Payment This Period: 1873.85

Outstanding Balance at Close of This Period: 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blue State Digital

Nature of Debt (Purpose): computer technology fees

Mailing Address 406 7th St NW

City Washington State DC Zip Code 20004

Outstanding Balance Beginning This Period: 1487.80

Transaction ID : D512091

Amount Incurred This Period: 0.00

Payment This Period: 1487.80

Outstanding Balance at Close of This Period: 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blue State Digital

Nature of Debt (Purpose): computer technology fees

Mailing Address 406 7th St NW

City Washington State DC Zip Code 20004

Outstanding Balance Beginning This Period: 1604.70

Transaction ID : D512092

Amount Incurred This Period: 0.00

Payment This Period: 1604.70

Outstanding Balance at Close of This Period: 0.00

1) **SUBTOTALS** This Period This Page (optional) ... ▶	0.00
2) **TOTALS** This Period (last page this line number only) ... ▶	
3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)... ▶	
4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) ☐ 9 ☒ 10

NAME OF COMMITTEE (In Full)

Braley for Iowa

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Well & Lighthouse, LLC

Nature of Debt (Purpose): production and commission exp

Mailing Address 1244 19th St NW

City Washington | State | Zip Code DC 20036

Outstanding Balance Beginning This Period: 10000.00

Transaction ID : D507803

Amount Incurred This Period: 0.00

Payment This Period: 10000.00

Outstanding Balance at Close of This Period: 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Well & Lighthouse, LLC

Nature of Debt (Purpose): digital media

Mailing Address 1244 19th St NW

City Washington | State | Zip Code DC 20036

Outstanding Balance Beginning This Period: 19782.44

Transaction ID : D512093

Amount Incurred This Period: 0.00

Payment This Period: 19782.44

Outstanding Balance at Close of This Period: 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Well & Lighthouse, LLC

Nature of Debt (Purpose): media commissions

Mailing Address 1244 19th St NW

City Washington | State DC | Zip Code 20036

Outstanding Balance Beginning This Period: 0.00

Transaction ID : D521591

Amount Incurred This Period: 60464.46

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 60464.46

1) **SUBTOTALS** This Period This Page (optional) ... ▶	60464.46
2) **TOTALS** This Period (last page this line number only) ... ▶	
3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)... ▶	
4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) ☐ 9 ☒ 10

NAME OF COMMITTEE (In Full)

Braley for Iowa

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Well & Lighthouse, LLC

Nature of Debt (Purpose): fundraising consulting fees

Mailing Address 1244 19th St NW

City Washington | State DC | Zip Code 20036

Transaction ID : D521592

Outstanding Balance Beginning This Period: 0.00

Amount Incurred This Period: 5000.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 5000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City | State | Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City | State | Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ... ▶	5000.00
2) **TOTALS** This Period (last page this line number only) ... ▶	65464.46
3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ... ▶	0.00
4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶	65464.46

15020126806

Hand Delivered

15020125807

JULIE ADAMS
SECRETARY

DANA K. MACCALLUM
SUPERINTENDENT
HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 4-13-15
Date of Receipt

USPS FIRST CLASS MAIL _____ _____
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS		☐
UPS		☐
DHL		☐
AIRBORNE EXPRESS		☐

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

POSTMARK ILLEGIBLE ☐ POSTMARK ☐

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 4-13-15

15020126508

2/28/2015

SEN PATCH

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