

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

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Office Use Only

FEC MAIL CENTER 12FE4M5

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. IOWA FIRST FOUNDATION FEDERAL PAC

ADDRESS (number and street) 201 E. MAIN STREET LAKE MALLS IA 50450

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00489732

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

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)
July 31 Mid-Year Report (Non-election Year Only) (MY)
Termination Report (TER)

- (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

Election on [ ] / [ ] / [ ] in the State of [ ]

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on [ ] / [ ] / [ ] in the State of [ ]

5. Covering Period 07 / 01 / 2011 through 12 / 31 / 2011

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 Richard Schwarm

Signature of Treasurer [Signature] Date 01 / 30 / 2012

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

Table with 10 columns for Office Use Only

FEC FORM 3X Rev. 12/2004

12030731904

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**IOWA FIRST FOUNDATION FEDERAL PAC**

Report Covering the Period: From: **07** / **01** / **2011** To: **12** / **31** / **2011**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <b>2011</b>	<b>258287</b>	<b>258287</b>
(b) Cash on Hand at Beginning of Reporting Period.....	<b>250701</b>	
(c) Total Receipts (from Line 19) .....	<b>0</b>	<b>0</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<b>250701</b>	<b>207001</b>
7. Total Disbursements (from Line 31).....	<b>3043</b>	<b>3043</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<b>254058</b>	<b>254058</b>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<b>0</b>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<b>0</b>	

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

12030731905

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

IOWA FIRST FOUNDATION FEDERAL PAC

Report Covering the Period: From: 07 ' 01 ' 2011 To: 12 ' 31 ' 2011

**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).....
  - (ii) Unitemized.....
  - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶
- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

0	0
0	0
0	0
0	0
0	0

12. Transfers From Affiliated/Other Party Committees.....

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13. All Loans Received.....

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14. Loan Repayments Received.....

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15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

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16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

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17. Other Federal Receipts (Dividends, Interest, etc.).....

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18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3).....

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(b) Levin Funds (from Schedule H5).....

--	--

(c) Total Transfers (add 18(a) and 18(b))..

--	--

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

0	0
---	---

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

0	0
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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....		
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3043	4229
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3043	4229

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**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 / OF /	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)

IOWA FIRST FOUNDATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

**A.**

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/  /

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**B.**

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/  /

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/  /

Amount of Each Receipt this Period

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

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

12030731909

**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 / OF 1

<input 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)

IOWA FIRST FOUNDATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. <u>United States Postal Service</u>		Date of Disbursement
Mailing Address <u>206 N. Mill Street</u>		<input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y Y <u>07 / 15 / 2011</u>
City <u>Lake Mills</u> State <u>Iowa</u> Zip Code <u>50450</u>		Amount of Each Disbursement this Period <input type="text" value="579"/>
Purpose of Disbursement <u>mail Form 3X to FEC</u>		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

B. <u>United States Postal Service</u>		Date of Disbursement
Mailing Address <u>206 N. Mill Street</u>		<input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y Y <u>08 / 15 / 2011</u>
City <u>Lake Mills</u> State <u>Iowa</u> Zip Code <u>50450</u>		Amount of Each Disbursement this Period <input type="text" value="599"/>
Purpose of Disbursement <u>mail report to IRS</u>		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

C. <u>Harland Clark</u>		Date of Disbursement
Mailing Address <u>10931 Laureate Drive</u>		<input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y Y <u>08 / 24 / 2011</u>
City <u>San Antonio</u> State <u>Texas</u> Zip Code <u>78249</u>		Amount of Each Disbursement this Period <input type="text" value="1865"/>
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional).....▶

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

12030731910

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)  
*1/30/12*

USPS Priority Mail Postmarked  
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*CHM*  
PREPARER  
(3/2005)

*2/3/12*  
DATE PREPARED

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