

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines Heartland Values PAC

ADDRESS (number and street) PO Box 505 Check if different than previously reported. (ACC) Sioux Falls SD 57101

2. FEC IDENTIFICATION NUMBER C00409003 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 07 01 2009 through 09 30 2009

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 Barb Buell

Signature of Treasurer Electronically Filed by Barb Buell Date 10 15 2009

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 FEC FORM 3X (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Heartland Values PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	9

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		168074.10
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	133967.33									
(c) Total Receipts (from Line 19)	105358.09	127866.11								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	239325.42	295940.21								
7. Total Disbursements (from Line 31)	124756.22	219546.01								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	114569.20	76394.20								
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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Heartland Values PAC

Report Covering the Period: From: To:

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)	53425.00	53425.00
(ii) Unitemized	38431.25	38431.25
(iii) TOTAL (add Lines 11(a)(i) and (ii)	91856.25	91856.25
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	13500.00	36000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	105356.25	127856.25
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.)	1.84	9.86
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))	105358.09	127866.11
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	105358.09	127866.11

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.....	77256.22	107546.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	77256.22	107546.01
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	42500.00	104500.00
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	2500.00
(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	2500.00
29. Other Disbursements.....	5000.00	5000.00
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))..	124756.22	219546.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	124756.22	219546.01

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)	105356.25	127856.25
34. Total Contribution Refunds (from Line 28(d))	0.00	2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	105356.25	125356.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	77256.22	107546.01
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	77256.22	107546.01

**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 / 66
	<input checked="" 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)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial)
Richard S Griffith

Mailing Address 3417 Milam St

City Houston State TX Zip Code 77002-9531

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

Name of Employer Richard Standifen Griffith Occupation Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 06 / 2009

Transaction ID: A83378D9AB2B749EBB6F

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Martin E Janis

Mailing Address 401 N. Michigan Ave Suite 2920

City Chicago State IL Zip Code 60611-5592

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

Name of Employer Martin E Janis & Co Inc Occupation Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 07 / 15 / 2009

Transaction ID: A78443FCB3AE74DD688A

Amount of Each Receipt this Period 3000.00

C. Full Name (Last, First, Middle Initial)
Albert P Hegyi

Mailing Address 310 Dakota Dunes Blvd

City Dakota Dunes State SD Zip Code 57049-5339

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

Name of Employer Self Occupation Business Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 15 / 2009

Transaction ID: A9F29D41870BD43648BE

Amount of Each Receipt this Period 5000.00

SUBTOTAL of Receipts This Page (optional) ► 8250.00

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 / 66
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) Brian K Gunderson</p> <p>Mailing Address 41 Northshore Dr</p> <p>City State Zip Code McCook Lake SD 57049-4013</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Gunderson Co Inc Occupation President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2000.00</p>	<p>Date of Receipt 07 / 23 / 2009</p> <p>Transaction ID: AD3A84EA2720041F4850</p> <p>Amount of Each Receipt this Period 1000.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Martin E Janis</p> <p>Mailing Address 401 N. Michigan Ave Suite 2920</p> <p>City State Zip Code Chicago IL 60611-5592</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Martin E Janis & Co Inc Occupation Chairman</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt 07 / 23 / 2009</p> <p>Transaction ID: A3AE44A3481FF4865BD4</p> <p>Amount of Each Receipt this Period 1000.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Nancy A Nord</p> <p>Mailing Address 65 Observatory Cir NW</p> <p>City State Zip Code Washington DC 20008-3611</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Consumer Product Safety Commission Occupation Commissioner</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>	<p>Date of Receipt 07 / 23 / 2009</p> <p>Transaction ID: AAFB82E1E8E574CF1885</p> <p>Amount of Each Receipt this Period 500.00</p>
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SUBTOTAL of Receipts This Page (optional)	2500.00
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 / 66
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial)
Gerald L Berry

Mailing Address 1630 Tiverton St

City State Zip Code
Winter Springs FL 32708-6126

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Covenant Aviation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 23 / 2009
Transaction ID: A1F284699E3CC4F98A8A
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Harry F Byrd, III

Mailing Address PO Box 472

City State Zip Code
Berryville VA 22611-0472

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 24 / 2009
Transaction ID: AA1CC3AA638074A4A8D1
Amount of Each Receipt this Period 2000.00

C. Full Name (Last, First, Middle Initial)
Donald J Ely

Mailing Address PO Box 765

City State Zip Code
Sunbury PA 17801-0765

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 28 / 2009
Transaction ID: A80BD53AD7A014D49A68
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) 2500.00

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 / 66		
	<input checked="" 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

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial)
David A Bockorny

Mailing Address 3101 S Bishop Jones Pl

City State Zip Code
Sioux Falls SD 57103-4669

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

Name of Employer Occupation
Bockorny Petrizzo Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
07 / 28 / 2009

Transaction ID: A6D8396DEAC22468B8E7

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Bryan S Reichel

Mailing Address 9600 Towering Oaks Curv

City State Zip Code
Prior Lake MN 55372-8131

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

Name of Employer Occupation
Pure Choice Inc President/ceo

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
07 / 28 / 2009

Transaction ID: A20B769CB4A43484BB70

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Robert Sunderland

Mailing Address 953 Pyrite Ave

City State Zip Code
Henderson NV 89011-3059

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2009

Transaction ID: A51D38EE0A9D641219C4

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► 3200.00

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 / 66
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) Charles H Hofgaarden		Date of Receipt
	Mailing Address 891 Flintridge Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 13 / 2009
	City	State	Zip Code
	La Canada Flintrid	CA	91011-4064
	FEC ID number of contributing federal political committee. C		Transaction ID: A250BD116BD364CF59EE
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

B.	Full Name (Last, First, Middle Initial) Edwin A Seipp		Date of Receipt
	Mailing Address 49 Tuscaloosa Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 13 / 2009
	City	State	Zip Code
	Atherton	CA	94027-4014
	FEC ID number of contributing federal political committee. C		Transaction ID: ABBD81F3902984E3498C
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

C.	Full Name (Last, First, Middle Initial) David L Gaede		Date of Receipt
	Mailing Address 3673 Ridgeway Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 13 / 2009
	City	State	Zip Code
	Dayton	OH	45419-1126
	FEC ID number of contributing federal political committee. C		Transaction ID: A37CEA7D109AB40A59F1
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 750.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 66
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial)
Deryl F Hamann

Mailing Address 1500 Woodmen Tower

City State Zip Code
Omaha NE 68102-2002

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

Name of Employer Baird Holm Occupation Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2009

Transaction ID: AD199A41C1AF347CFA53

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Morrie Zimring

Mailing Address 23 Topton Way

City State Zip Code
Saint Louis MO 63105-1662

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2009

Transaction ID: A03CE877D6AAA4366AA9

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
A. C Jones

Mailing Address 1903 Madden Rd

City State Zip Code
Jacksonville AR 72076-2634

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2009

Transaction ID: A8460A64CDB2743029C2

Amount of Each Receipt this Period
175.00

SUBTOTAL of Receipts This Page (optional) ► **1175.00**

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 12 / 66
	(check only one)	
<input checked="" 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

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) Charles F Gorder, Sr.		Date of Receipt MM / DD / YYYY 08 / 13 / 2009		
	Mailing Address 5526 Toyon Rd		Transaction ID: AEA2FFFF04BDB411489C		
	City San Diego	State CA	Zip Code 92115-1020	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Alhadeff & Solar Llp	Occupation Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00			

B.	Full Name (Last, First, Middle Initial) Marvin H Goehring		Date of Receipt MM / DD / YYYY 08 / 13 / 2009		
	Mailing Address 301 W. Redwood St Apt 11		Transaction ID: A1BAD97266B7D453DADE		
	City Parkston	State SD	Zip Code 57366-2253	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

C.	Full Name (Last, First, Middle Initial) Evelyn L Jackson		Date of Receipt MM / DD / YYYY 08 / 18 / 2009		
	Mailing Address 27 Riverbend Dr		Transaction ID: AE80FA6A8A45F4AE5A50		
	City Shelby	State OH	Zip Code 44875-1766	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

SUBTOTAL of Receipts This Page (optional)	750.00
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 13 / 66
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) Max L Leget		Date of Receipt
	Mailing Address 435 Prentis Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 18 / 2009
	City	State	Zip Code
	Vermillion	SD	57069-2515
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Retired		Occupation Retired	Transaction ID: A70B0953F035A4234BB0 Amount of Each Receipt this Period <input type="text"/> 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 850.00	

B.	Full Name (Last, First, Middle Initial) Kenneth J Quagenti		Date of Receipt
	Mailing Address 51 Miller Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 18 / 2009
	City	State	Zip Code
	Farmingdale	NY	11735-2040
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Retired		Occupation Retired	Transaction ID: AF9F66073C18A4E0496D Amount of Each Receipt this Period <input type="text"/> 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 300.00	

C.	Full Name (Last, First, Middle Initial) Darrell D Butterwick		Date of Receipt
	Mailing Address 1694 Kerry Ln		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 18 / 2009
	City	State	Zip Code
	Woodbury	MN	55125-3348
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Retired		Occupation Retired	Transaction ID: AE3F771FB1AEC4D2EAD5 Amount of Each Receipt this Period <input type="text"/> 150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 300.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 950.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 14 / 66
	<input checked="" 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)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) Karl F Gengler	Date of Receipt MM / DD / YYYY 08 / 19 / 2009
	Mailing Address 9704 N. Range Line Rd	Transaction ID: AB8E291486188481FA27
	City State Zip Code Mequon WI 53092-5604	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00

B.	Full Name (Last, First, Middle Initial) Robert V Cahill	Date of Receipt MM / DD / YYYY 08 / 19 / 2009
	Mailing Address 1369 Via Coronel	Transaction ID: A9B10019AE9054FD581C
	City State Zip Code Palos Verdes Estat CA 90274-1965	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Chartwell Partners LLC Occupation Attorney Executive 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) Caroline J Selgrat	Date of Receipt MM / DD / YYYY 08 / 19 / 2009
	Mailing Address 11426 N. Balboa Dr	Transaction ID: AA14AC295F3A649408C5
	City State Zip Code Sun City AZ 85351-3963	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

SUBTOTAL of Receipts This Page (optional)	1550.00
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 / 66
(check only one)

<input checked="" 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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)
Barb Lien

Mailing Address PO Box 440

City State Zip Code
Rapid City SD 57709-0440

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2009

Transaction ID: ACCCECC5993BC48A3901

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Kathryn G Burney

Mailing Address 9804 Nicholas St Apt 102
Bloomfield Forum

City State Zip Code
Omaha NE 68114-2169

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2009

Transaction ID: A0F59412341E94F1C863

Amount of Each Receipt this Period
800.00

C.

Full Name (Last, First, Middle Initial)
Norman Miller

Mailing Address 7763 W Libby St

City State Zip Code
Glendale AZ 85308-8240

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2009

Transaction ID: A291A611AA8924A9AB33

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1800.00**

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 16 / 66
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial)
Dr. Kevin J O'Connell

Mailing Address 2503 S. Lockwood Place

City State Zip Code
Sioux Falls SD 57105-3354

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

Name of Employer Occupation
Urology Institute Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2009

Transaction ID: AAA2282C947D84771B38

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Richard Gallo, MD

Mailing Address 98 Sutton Cir Apt 904

City State Zip Code
Rainbow City AL 35906-3273

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

Name of Employer Occupation
Anesthesia Assoc of NEA PA Anesthesiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2009

Transaction ID: A08897F13B77C4273AFA

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Ada A Strassenburgh

Mailing Address PO Box 608

City State Zip Code
Ocean View NJ 08230-0608

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2009

Transaction ID: A7A1D5FDD271343028FA

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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 17 / 66
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial)
Kenneth R Beck

Mailing Address 136 River Rd

City Pierre State SD Zip Code 57501-5219

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

Name of Employer Beck Motors Inc Occupation Auto Dealer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2009
Transaction ID: AF9BA53DE9B234A17987
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Michael J Lynd

Mailing Address 113 Ottawa Run

City Shavano Park State TX Zip Code 78231-1457

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

Name of Employer The Lynd Co Occupation Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 20 / 2009
Transaction ID: AD2961CEE643949F2823
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
William G Zimmerman

Mailing Address 800 N Mellette

City Pierre State SD Zip Code 57501-4722

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

Name of Employer Self Occupation Rancher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 20 / 2009
Transaction ID: AF044E3D3C39C456CB72
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2000.00

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 18 / 66
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial)
Dr. David L Elson

Mailing Address 513 E. Plum Creek Rd

City State Zip Code
Sioux Falls SD 57105-6950

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

Name of Employer Occupation
Avera Health Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 08 / 21 / 2009
Transaction ID: A9876216FD39642CA9C9
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Elsa D Prince Broekhaizen

Mailing Address 190 River Ave #3

City State Zip Code
Holland MI 49423-2825

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

Name of Employer Occupation
Self Business

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 21 / 2009
Transaction ID: A17B320D6C520471591B
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
William H Simpson

Mailing Address 2532 Hepplewhite Dr

City State Zip Code
York PA 17404-1216

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

Name of Employer Occupation
Self Corporate Board Member

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 21 / 2009
Transaction ID: AD9B14261B3B24947A5A
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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 19 / 66
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) Duane Sather	Date of Receipt MM / DD / YYYY 08 / 24 / 2009
	Mailing Address 1501 E. Willow Ridge Cir	Transaction ID: A432F5B9D71E84DC3958
	City State Zip Code Sioux Falls SD 57110-7576	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Sathers Inc Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

B.	Full Name (Last, First, Middle Initial) Helen K Groves	Date of Receipt MM / DD / YYYY 08 / 24 / 2009
	Mailing Address 17490 Private Rd 4105	Transaction ID: A0DC074ACD176409789E
	City State Zip Code Baird TX 79504	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self Occupation Rancher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

C.	Full Name (Last, First, Middle Initial) Barbara F Andrikopoulos	Date of Receipt MM / DD / YYYY 08 / 24 / 2009
	Mailing Address PO Box 788	Transaction ID: AB4E51D0EFFFF4CDA2F
	City State Zip Code Cheyenne WY 82003-0788	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Homemaker Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

SUBTOTAL of Receipts This Page (optional)	2000.00
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 20 / 66
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial)
Joann L Greb

Mailing Address 8861 W. Wilson Bay Dr

City State Zip Code
Hayward WI 54843-5221

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 25 / 2009
Transaction ID: AF17CBFE9AC344C1EA7D
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
John P Cole

Mailing Address PO Box 6190

City State Zip Code
Carefree AZ 85377-6190

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 25 / 2009
Transaction ID: A9638F6EE8BF443D3B00
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
John D Besse

Mailing Address 7364 Lake Bluff 19 4 Rd

City State Zip Code
Gladstone MI 49837-2409

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

Name of Employer Besse Forest Products Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 25 / 2009
Transaction ID: AC48A1D0461744967A88
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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 21 / 66
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/>	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial)
Dolores C Ghyselink

Mailing Address 40530 Hwy 41

City State Zip Code
Oakhurst CA 93644-9621

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

Name of Employer Self Occupation Motel Operator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt / /
Transaction ID: A0BFF74422AC240C4ADB

Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Earl W Smith

Mailing Address 2700 E. Jacaranda Rd

City State Zip Code
Palm Springs CA 92264-4845

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt / /
Transaction ID: A7BA31FE247D641BD82C

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Robert W Schneebeck

Mailing Address PO Box 2038

City State Zip Code
Englewood FL 34295-2038

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

Name of Employer Strategic Programs Occupation Insurance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt / /
Transaction ID: A7F56DBF0C3174FF19D4

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ►

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 22 / 66
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial)
Thomas L Gutshall

Mailing Address 24968 O'Keefe Ln

City State Zip Code
Los Altos Hills CA 94022-4612

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt / /
Transaction ID: AA7561D264A6E48768E3

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Richard D Siragusa

Mailing Address 333 E. Westminster Rd Apt 3c

City State Zip Code
Lake Forest IL 60045-5517

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt / /
Transaction ID: AF54F3ACF2B9642B39A1

Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Earl D Bohlen

Mailing Address 605 S. 2nd St Apt 4

City State Zip Code
Milbank SD 57252-2900

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

Name of Employer Self Occupation Developer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt / /
Transaction ID: A74B88E8827D9427CAFO

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ►

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 23 / 66
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial)
Ella Mae Julian

Mailing Address 1737 S Rd F

City Johnson State KS Zip Code 67855-8819

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

Name of Employer Self Occupation Farming

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 30 / 2009

Transaction ID: A71B2E3EBDA55458B8B5

Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Marian D Sullivan

Mailing Address PO Box 5361

City Sioux Falls State SD Zip Code 57117-5361

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

Name of Employer Sullivans Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 30 / 2009

Transaction ID: AEAA437706AEE4B75B31

Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
F A Maddox, Jr.

Mailing Address 377 S. Yates Rd

City Memphis State TN Zip Code 38120-2431

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2009

Transaction ID: A204499C3F94C46B3A76

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00

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 24 / 66
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) William R Engel	Date of Receipt MM / DD / YYYY 08 / 30 / 2009
	Mailing Address 7059 Coburn Ln	Transaction ID: A4DDAF6D1C01D4A50BB3
	City State Zip Code Johnston IA 50131-1253	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

B.	Full Name (Last, First, Middle Initial) Marion G Wells	Date of Receipt MM / DD / YYYY 08 / 30 / 2009
	Mailing Address 2100 S Ocean Dr Apt 4G	Transaction ID: A244E68A17EE44F518E4
	City State Zip Code Fort Lauderdale FL 33316-3842	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Homemaker Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

C.	Full Name (Last, First, Middle Initial) William Duhamel	Date of Receipt MM / DD / YYYY 09 / 02 / 2009
	Mailing Address 4 Verona Pl	Transaction ID: AF8DF3ADEBC314775987
	City State Zip Code Corte Madera CA 94925-1940	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Farallon Capital Mgmt Occupation Investor 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)	▶	2300.00
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 25 / 66
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial)
Miss Monte Richardson

Mailing Address 36 Lambeth Dr

City Asheville State NC Zip Code 28803-3431

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 09 / 02 / 2009
Transaction ID: A2D41B2DA3C504093B1B
 Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
Alice S Riedel

Mailing Address 120 E. Roses Rd

City San Gabriel State CA Zip Code 91775-2343

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 02 / 2009
Transaction ID: A3D9FFC020D1E48C39AD
 Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Bush Fullerton

Mailing Address 1260 McDonald Dr

City Huron State SD Zip Code 57350-3521

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

Name of Employer Overbuilt Inc Occupation Plant Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 04 / 2009
Transaction ID: A17EDB2AD37724BE79D1
 Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 950.00

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 26 / 66
(check only one)

<input checked="" 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

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial)
Henry Carlson, Jr.
Mailing Address 9101 E Madison St
City State Zip Code
Sioux Falls SD 57110-7463
FEC ID number of contributing federal political committee. **C**
Name of Employer Henry Carlson Company Occupation General Contractor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 09 / 12 / 2009
Transaction ID: A5B7A1BCB43A34E98834
Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Warren G Keinath, Jr.
Mailing Address 12342 Creekhaven Dr
City State Zip Code
Saint Louis MO 63131-3825
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 09 / 12 / 2009
Transaction ID: A95C09C6DFE8647E4A1E
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Anthony J Ratchford
Mailing Address 6518 S Killarney Ct
City State Zip Code
Sioux Falls SD 57108-3207
FEC ID number of contributing federal political committee. **C**
Name of Employer Hegg Realtors Occupation Real Estate
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 09 / 12 / 2009
Transaction ID: AC509D2D46DF94395908
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 2250.00
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 27 / 66
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial)
Ilene L Handley

Mailing Address 2698 W 72nd St

City State Zip Code
Baldwin MI 49304-8919

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 09 / 12 / 2009
Transaction ID: AE8A198B9790C4E21A53
Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
Kristi Hoffman

Mailing Address 13655 Silver Fox Spur

City State Zip Code
Rapid City SD 57702-6532

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

Name of Employer Black Hills Ammunition Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 12 / 2009
Transaction ID: AB3CAD6532BB0486D9A9
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Stanley G Tate

Mailing Address 9999 Collins Ave

City State Zip Code
Bal Harbour FL 33154-1839

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

Name of Employer Self Occupation Tate Enterprises

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 16 / 2009
Transaction ID: ADE64BDA4510241FDA2E
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 1550.00

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 28 / 66
(check only one)

<input checked="" 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)
Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)
Inez L Bland

Mailing Address 2833 SW Tallgrass Dr

City State Zip Code
Topeka KS 66614-6026

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2009

Transaction ID: A94B7ADAA055341D7AEE

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Kenneth E Jones

Mailing Address 22495 Cabrillo Hwy S.

City State Zip Code
Half Moon Bay CA 94019-2571

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

Name of Employer Globe Wireless Occupation Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2009

Transaction ID: AB96F013ABD274367B00

Amount of Each Receipt this Period
5000.00

C.

Full Name (Last, First, Middle Initial)
Patrick A Nelson

Mailing Address 5009 S. Elderberry Cir

City State Zip Code
Sioux Falls SD 57108-2847

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

Name of Employer Medical X-ray Center Pc Occupation Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2009

Transaction ID: A4E51EF8DB2194496B40

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► 5600.00

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 29 / 66
	<input checked="" 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	

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) Mary Beth Callahan		Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address 129 Vintageisle Ln		Transaction ID: AB45F1734FA274F36870
	City Palm Beach Gardens	State FL	Zip Code 33418-4603
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Retired	Occupation Retired	

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00
---	-------------------------------------

B.	Full Name (Last, First, Middle Initial) Wiley Rein LLP		Date of Receipt MM / DD / YYYY 07 / 23 / 2009
	Mailing Address 1776 K St NW		Transaction ID: A060AD9B434524F6D8D8
	City Washington	State DC	Zip Code 20006-2304
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
	Name of Employer	Occupation	Partnership: See below

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) David Topol		Date of Receipt MM / DD / YYYY 07 / 23 / 2009
	Mailing Address 1776 K St NW		Transaction ID: A7C63CDAC376B46529D3
	City Washington	State DC	Zip Code 20006-2304
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Wiley Rein LLP	Occupation Partner	[MEMO ITEM] Partnership: Wiley Rein LLP

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00
---	------------------------------------

SUBTOTAL of Receipts This Page (optional)	3500.00
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 30 / 66
	<input checked="" 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	

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) Wayne Johnsen	Date of Receipt MM / DD / YYYY 07 / 23 / 2009
	Mailing Address 1776 K St NW	Transaction ID: AAA9372C29E0248299A6
	City State Zip Code Washington DC 20006-2304	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Wiley Rein LLP	Occupation Partner	[MEMO ITEM] Partnership: Wiley Rein LLP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Gregory Cirillo	Date of Receipt MM / DD / YYYY 07 / 23 / 2009
	Mailing Address 1776 K St NW	Transaction ID: A7368DD298EB64A118C2
	City State Zip Code Washington DC 20006-2304	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Wiley Rein LLP	Occupation Partner	[MEMO ITEM] Partnership: Wiley Rein LLP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Kay Tatum	Date of Receipt MM / DD / YYYY 07 / 23 / 2009
	Mailing Address 1776 K St NW	Transaction ID: ABF16B38A4373438595D
	City State Zip Code Washington DC 20006-2304	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Wiley Rein LLP	Occupation Partner	[MEMO ITEM] Partnership: Wiley Rein LLP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	0.00
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 31 / 66
(check only one)

<input checked="" 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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)
H Jason Gold

Mailing Address 1776 K St NW

City Washington State DC Zip Code 20006-2304

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

Name of Employer Wiley Rein LLP Occupation Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 23 / 2009

Transaction ID: AE1862CF3DB7B4628851

Amount of Each Receipt this Period 250.00

[MEMO ITEM]
Partnership: Wiley Rein LLP

B.

Full Name (Last, First, Middle Initial)
Bruce Joseph

Mailing Address 1776 K St NW

City Washington State DC Zip Code 20006-2304

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

Name of Employer Wiley Rein LLP Occupation Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 23 / 2009

Transaction ID: A055E510610C44EAEBDD

Amount of Each Receipt this Period 250.00

[MEMO ITEM]
Partnership: Wiley Rein LLP

C.

Full Name (Last, First, Middle Initial)
Daniel Hassett

Mailing Address 1776 K St NW

City Washington State DC Zip Code 20006-2304

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

Name of Employer Wiley Rein LLP Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 23 / 2009

Transaction ID: A5C48283176354092875

Amount of Each Receipt this Period 250.00

[MEMO ITEM]
Partnership: Wiley Rein LLP

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

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 32 / 66

(check only one)

<input checked="" 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

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)
Todd Stansbury

Mailing Address 1776 K St NW

City State Zip Code
Washington DC 20006-2304

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

Name of Employer Occupation
Wiley Rein LLP Partner

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 0 9

Transaction ID: A3C0FE00718064F2281F

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
Partnership: Wiley Rein LLP

B.

Full Name (Last, First, Middle Initial)
William Smith

Mailing Address 1776 K St NW

City State Zip Code
Washington DC 20006-2304

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

Name of Employer Occupation
Wiley Rein LLP Partner

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 0 9

Transaction ID: A2CECC5E2438A4CC3B1D

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
Partnership: Wiley Rein LLP

SUBTOTAL of Receipts This Page (optional) ▶

0.00

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

53425.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 66
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial)
InsurPac

Mailing Address 412 1st St SE Ste 300

City Washington State DC Zip Code 20003-1804

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 07 / 14 / 2009
Transaction ID: A61F1CDBEB5B34C4EAEE
Amount of Each Receipt this Period: 5000.00

B. Full Name (Last, First, Middle Initial)
AMFAM Federal PAC

Mailing Address 6000 American Pkwy

City Madison State WI Zip Code 53783-0001

FEC ID number of contributing federal political committee. **C** C00354290

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 07 / 28 / 2009
Transaction ID: A1E82DE28FC6E41FB955
Amount of Each Receipt this Period: 2000.00

C. Full Name (Last, First, Middle Initial)
General Dynamics Voluntary PAC

Mailing Address 2941 Fairview Park Dr Ste 100

City Falls Church State VA Zip Code 22042-4513

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 09 / 24 / 2009
Transaction ID: A7F0E2A3B3FB341CAA33
Amount of Each Receipt this Period: 1500.00

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 34 / 66
	(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)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) American Bankers PAC		Date of Receipt
	Mailing Address 1120 Connecticut Ave NW		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Washington	DC	20036-3905
	FEC ID number of contributing federal political committee.		Transaction ID: ABDCB3764BB0F4CC1854
	<input type="text" value="C"/> C00004275		Amount of Each Receipt this Period
Name of Employer		Occupation	<input type="text" value="5000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="13500.00"/>

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 35 / 66

<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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) The Lukens Company</p> <p>Mailing Address 2800 S Shirlington Rd Ste 900</p> <p>City Arlington State VA Zip Code 22206-3619</p> <p>Purpose of Disbursement PAC Mailing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B1E634B1804E8426ABD1</p> <p>Date of Disbursement 07 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 6960.93</p>
<p>B. Full Name (Last, First, Middle Initial) Justin Brasell</p> <p>Mailing Address 200 N Phillips Ave Ste L101</p> <p>City Sioux Falls State SD Zip Code 57104-6059</p> <p>Purpose of Disbursement PAC Campaign Manager</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B81F797EFF0604927927</p> <p>Date of Disbursement 07 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 4800.00</p>
<p>C. Full Name (Last, First, Middle Initial) Bryan Cave LLP</p> <p>Mailing Address PO Box 503089</p> <p>City Saint Louis State MO Zip Code 63150-0001</p> <p>Purpose of Disbursement Legal Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B863E0E09CFE34B47AEE</p> <p>Date of Disbursement 07 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 203.50</p>

SUBTOTAL of Disbursements This Page (optional) ▶

11964.43

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 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)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) Bialek's Music Mailing Address 932 Hungerford Dr # 3 City Rockville State MD Zip Code 20850-1713 Purpose of Disbursement PAC Event Entertainment 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: B6158CDF4F4224BD9A34 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 9
	Category/Type Amount of Each Disbursement this Period 375.00	

B. Full Name (Last, First, Middle Initial) Murphy Goldammer & Prendergast Llp Mailing Address PO Box 1728 City Sioux Falls State SD Zip Code 57101-1728 Purpose of Disbursement Legal Fees 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: B03AC498DE5AD4FCE87E Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 9
	Category/Type Amount of Each Disbursement this Period 652.96	

C. Full Name (Last, First, Middle Initial) Click Rain Mailing Address 401 E 8th St Ste 220 City Sioux Falls State SD Zip Code 57103-7008 Purpose of Disbursement PAC Web Site Fees 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: BACE42296192C42C1812 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 9
	Category/Type Amount of Each Disbursement this Period 3445.00	

SUBTOTAL of Disbursements This Page (optional) ▶	4472.96
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 37 / 66

<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)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) Van Brunt On Phillips LLC	Transaction ID: BBCAF51F046264DB8A93
	Mailing Address 3130 W 57th St Ste 112	Date of Disbursement MM / DD / YYYY 07 / 01 / 2009
	City State Zip Code Sioux Falls SD 57108-3123	Amount of Each Disbursement this Period 7.17
	Purpose of Disbursement Utilities	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) First National Bank	Transaction ID: B8D8FD3FD6A84409FA88
	Mailing Address 100 N Phillips Ave	Date of Disbursement MM / DD / YYYY 07 / 02 / 2009
	City State Zip Code Sioux Falls SD 57104-6715	Amount of Each Disbursement this Period 127.43
	Purpose of Disbursement Credit Card Service Fee	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) First National Bank	Transaction ID: B227646E4FACE4D1C8CA
	Mailing Address 100 N Phillips Ave	Date of Disbursement MM / DD / YYYY 07 / 10 / 2009
	City State Zip Code Sioux Falls SD 57104-6715	Amount of Each Disbursement this Period 12.00
	Purpose of Disbursement Bank Service Fee	Category/ Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	146.60
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 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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) Sprint</p> <p>Mailing Address Customer Service</p> <p>City Taunton State MA Zip Code 02780</p> <p>Purpose of Disbursement Phone Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B068941F78F4A432E99D</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="57.74"/></p>
<p>B. Full Name (Last, First, Middle Initial) Schneider's of Capitol Hill</p> <p>Mailing Address 300 Massachusetts Ave</p> <p>City Washington State DC Zip Code 20002-5702</p> <p>Purpose of Disbursement PAC Event Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BC0CCD1FF2AC84372B13</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.63"/></p>
<p>C. Full Name (Last, First, Middle Initial) Angel R Paulson</p> <p>Mailing Address 200 N Phillips Ave Ste L101</p> <p>City Sioux Falls State SD Zip Code 57104-6059</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BAAB4499FD5704561A85</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="538.10"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="896.47"/>
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 39 / 66

<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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) Christopher Adkins</p> <p>Mailing Address 200 N Phillips Ave Ste L101</p> <p>City Sioux Falls State SD Zip Code 57104-6059</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B0714535E9B02466B89B</p> <p>Date of Disbursement 07 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 230.87</p>
<p>B. Full Name (Last, First, Middle Initial) Courtney Heitkamp</p> <p>Mailing Address 3512 S Anita Ave</p> <p>City Sioux Falls State SD Zip Code 57103-7214</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B30CC9849E3984C47974</p> <p>Date of Disbursement 07 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 230.88</p>
<p>C. Full Name (Last, First, Middle Initial) United States Treasury</p> <p>Mailing Address PO Box 660351</p> <p>City Ogden State UT Zip Code 84201-0001</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BB4E8F572458941C6A31</p> <p>Date of Disbursement 07 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 512.72</p>

SUBTOTAL of Disbursements This Page (optional) ▶

974.47

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 40 / 66

<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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) Barb Buell</p> <p>Mailing Address PO Box 505</p> <p>City Sioux Falls State SD Zip Code 57101-0505</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B824200B8C19E4EF1862</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="269.35"/></p>
<p>B. Full Name (Last, First, Middle Initial) South Dakota Dept Of Revenue</p> <p>Mailing Address PO Box 5055</p> <p>City Sioux Falls State SD Zip Code 57117-5055</p> <p>Purpose of Disbursement South Dakota Use Tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B5591DD82772A4424B8C</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="94.47"/></p>
<p>C. Full Name (Last, First, Middle Initial) Bryan Cave LLP</p> <p>Mailing Address PO Box 503089</p> <p>City Saint Louis State MO Zip Code 63150-0001</p> <p>Purpose of Disbursement Legal Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B6B4E0CAB60E74984B65</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="563.82"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

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 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)
Heartland Values PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 360002</p> <p>City Fort Lauderdale State FL Zip Code 33336-0002</p> <p>Purpose of Disbursement Credit Card Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B7C1805FE6D2D4112956</p> <p>Date of Disbursement 07 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 232.28</p> <p>Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Angel R Paulson</p> <p>Mailing Address 200 N Phillips Ave Ste L101</p> <p>City Sioux Falls State SD Zip Code 57104-6059</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BA4FDD9494FA04ECC839</p> <p>Date of Disbursement 07 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 692.80</p> <p>Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Christopher Adkins</p> <p>Mailing Address 200 N Phillips Ave Ste L101</p> <p>City Sioux Falls State SD Zip Code 57104-6059</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B15EF75CDC2084EA8933</p> <p>Date of Disbursement 07 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 677.63</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1602.71

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 42 / 66

<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)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) Courtney Heitkamp Mailing Address 3512 S Anita Ave City Sioux Falls State SD Zip Code 57103-7214 Purpose of Disbursement Payroll 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: B1ABD300ACC434423B1D Date of Disbursement 07 / 31 / 2009 Amount of Each Disbursement this Period 230.87 Category/Type
B.	Full Name (Last, First, Middle Initial) Charles Schwab & Co Inc Mailing Address 101 Montgomery St City San Francisco State CA Zip Code 94104-4151 Purpose of Disbursement Investment Management Fee 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: BEDC38AD0B1D34EC4BBA Date of Disbursement 07 / 31 / 2009 Amount of Each Disbursement this Period 57.09 Category/Type
C.	Full Name (Last, First, Middle Initial) Barb Buell Mailing Address PO Box 505 City Sioux Falls State SD Zip Code 57101-0505 Purpose of Disbursement Payroll 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: B32A83F2894F04BF09D9 Date of Disbursement 07 / 31 / 2009 Amount of Each Disbursement this Period 269.36 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	557.32
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 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)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) Justin Brasell <hr/> Mailing Address 200 N Phillips Ave Ste L101 <hr/> City Sioux Falls State SD Zip Code 57104-6059 <hr/> Purpose of Disbursement PAC Campaign Manager Candidate Name <hr/> 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: B1FE674364E0545A5A06 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 8000.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) MDI Imaging & Mail <hr/> Mailing Address 21955 Cascades Parkway <hr/> City Dulles State VA Zip Code 20166 <hr/> Purpose of Disbursement PAC Mailing Postage Candidate Name <hr/> 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: B53A4548509DC4CFB95B Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 4158.94
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Nelson & Nelson Cpas Llp <hr/> Mailing Address 1517 S Minnesota Ave <hr/> City Sioux Falls State SD Zip Code 57105-1750 <hr/> Purpose of Disbursement Accounting Services Candidate Name <hr/> 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: B91E1FEC7DB7C4377AD9 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 79.50
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	12238.44
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 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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) Hyatt Hotel</p> <p>Mailing Address 400 New Jersey Ave NW</p> <p>City Washington State DC Zip Code 20001-2002</p> <p>Purpose of Disbursement PAC Event Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B74D884A4B14E466EB49</p> <p>Date of Disbursement 08 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 7536.13</p>
<p>B. Full Name (Last, First, Middle Initial) The LS Group</p> <p>Mailing Address 912 F St NW Apt 1106</p> <p>City Washington State DC Zip Code 20004-1451</p> <p>Purpose of Disbursement PAC Fundraising Consultant</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BDD31D3C2412145A29C2</p> <p>Date of Disbursement 08 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 5850.00</p>
<p>C. Full Name (Last, First, Middle Initial) First National Bank</p> <p>Mailing Address 100 N Phillips Ave</p> <p>City Sioux Falls State SD Zip Code 57104-6715</p> <p>Purpose of Disbursement Credit Card Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BA3F4500C27644401BA6</p> <p>Date of Disbursement 08 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 37.19</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>13423.32</p>
<p>TOTAL This Period (last page this line number only)</p>	

**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 45 / 66

<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)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) First National Bank Mailing Address 100 N Phillips Ave City Sioux Falls State SD Zip Code 57104-6715 Purpose of Disbursement Bank Service Fee 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: BB6AFC46FBCF744F28B2 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 12.00	

B. Full Name (Last, First, Middle Initial) United States Treasury Mailing Address PO Box 660351 City Ogden State UT Zip Code 84201-0001 Purpose of Disbursement Payroll Taxes 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: B43323218A0424ACBBAA Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 2 / 2 0 0 9
	Amount of Each Disbursement this Period 609.96	

C. Full Name (Last, First, Middle Initial) Barb Buell Mailing Address PO Box 505 City Sioux Falls State SD Zip Code 57101-0505 Purpose of Disbursement Payroll 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: B13FBAF4DF86E421CB66 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 9
	Amount of Each Disbursement this Period 269.36	

SUBTOTAL of Disbursements This Page (optional) ▶	891.32
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 46 / 66

<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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) Angel R Paulson</p> <p>Mailing Address 200 N Phillips Ave Ste L101</p> <p>City Sioux Falls State SD Zip Code 57104-6059</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BC49CBBF486E147109D0</p> <p>Date of Disbursement 08 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 369.40</p>
<p>B. Full Name (Last, First, Middle Initial) Christopher Adkins</p> <p>Mailing Address 200 N Phillips Ave Ste L101</p> <p>City Sioux Falls State SD Zip Code 57104-6059</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B14D5652DE7044D51B9C</p> <p>Date of Disbursement 08 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 230.87</p>
<p>C. Full Name (Last, First, Middle Initial) Courtney Heitkamp</p> <p>Mailing Address 3512 S Anita Ave</p> <p>City Sioux Falls State SD Zip Code 57103-7214</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B3B56A78E407E4529848</p> <p>Date of Disbursement 08 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 230.88</p>

SUBTOTAL of Disbursements This Page (optional) ▶

831.15

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 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)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) Carrie Buell	Transaction ID: BA783DBC1D8314977BA5
	Mailing Address 3501 Emerson Ave S #301	Date of Disbursement MM / DD / YYYY 08 / 20 / 2009
	City Minneapolis State MN Zip Code 55408-3925	Amount of Each Disbursement this Period 300.00
	Purpose of Disbursement Photography Fee for PAC Event	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: BFF26B91E80164C0597E
	Mailing Address PO Box 360002	Date of Disbursement MM / DD / YYYY 08 / 25 / 2009
	City Fort Lauderdale State FL Zip Code 33336-0002	Amount of Each Disbursement this Period 28.50
	Purpose of Disbursement Credit Card Service Fees	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Sprint	Transaction ID: B5421A797EE0446799F6
	Mailing Address Customer Service	Date of Disbursement MM / DD / YYYY 08 / 27 / 2009
	City Taunton State MA Zip Code 02780	Amount of Each Disbursement this Period 57.74
	Purpose of Disbursement Phone Service	Category/ Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	386.24
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 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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) The Lukens Company</p> <p>Mailing Address 2800 S Shirlington Rd Ste 900</p> <p>City Arlington State VA Zip Code 22206-3619</p> <p>Purpose of Disbursement PAC Mailing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BD4BC07A682284C428C0</p> <p>Date of Disbursement 08 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 7594.27</p>
<p>B. Full Name (Last, First, Middle Initial) Bryan Cave LLP</p> <p>Mailing Address PO Box 503089</p> <p>City Saint Louis State MO Zip Code 63150-0001</p> <p>Purpose of Disbursement Legal Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B7515CDF0BB15467292C</p> <p>Date of Disbursement 08 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 200.84</p>
<p>C. Full Name (Last, First, Middle Initial) Christopher Adkins</p> <p>Mailing Address 200 N Phillips Ave Ste L101</p> <p>City Sioux Falls State SD Zip Code 57104-6059</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B2541EF31626B49728D3</p> <p>Date of Disbursement 08 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 230.88</p>

SUBTOTAL of Disbursements This Page (optional) ▶

8025.99

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 49 / 66

<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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) Barb Buell</p> <p>Mailing Address PO Box 505</p> <p>City Sioux Falls State SD Zip Code 57101-0505</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B4BBC2DEFF147482CB15</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="31"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="269.35"/></p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) First National Bank</p> <p>Mailing Address 100 N Phillips Ave</p> <p>City Sioux Falls State SD Zip Code 57104-6715</p> <p>Purpose of Disbursement Bank Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BCE8A901F2BD4461691C</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="31"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="40.34"/></p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Justin Brasell</p> <p>Mailing Address 200 N Phillips Ave Ste L101</p> <p>City Sioux Falls State SD Zip Code 57104-6059</p> <p>Purpose of Disbursement PAC Campaign Manager</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B933EA245FE884DAF9E9</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="01"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="8000.00"/></p> <p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="8309.69"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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 50 / 66

<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)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) First National Bank <hr/> Mailing Address 100 N Phillips Ave <hr/> City Sioux Falls State SD Zip Code 57104-6715 <hr/> Purpose of Disbursement Credit Card Service Fee Candidate Name <hr/> 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: B44F9807E855543D993F Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 2 / 2 0 0 9
	Amount of Each Disbursement this Period 126.73
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Usps <hr/> Mailing Address Main Post Office <hr/> City Sioux Falls State SD Zip Code 57104-7500 <hr/> Purpose of Disbursement PAC Postage Candidate Name <hr/> 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: BAFAAF66D65924039B02 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 880.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) First National Bank <hr/> Mailing Address 100 N Phillips Ave <hr/> City Sioux Falls State SD Zip Code 57104-6715 <hr/> Purpose of Disbursement Credit Card Service Fee Candidate Name <hr/> 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: B0947FAD5EA6242E4A03 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 12.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1018.73

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 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)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) Dane M Bloch	Transaction ID: BC7B5444156AE4DAF9E7
	Mailing Address 601 E 69th St Apt 129	Date of Disbursement MM / DD / YYYY 09 / 15 / 2009
	City Sioux Falls State SD Zip Code 57108-2405	Amount of Each Disbursement this Period 438.75
	Purpose of Disbursement Payroll 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) ▼

B.	Full Name (Last, First, Middle Initial) Christopher Adkins	Transaction ID: BCA1EE47EF2534F3D804
	Mailing Address 200 N Phillips Ave Ste L101	Date of Disbursement MM / DD / YYYY 09 / 15 / 2009
	City Sioux Falls State SD Zip Code 57104-6059	Amount of Each Disbursement this Period 230.87
	Purpose of Disbursement Payroll 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) ▼

C.	Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: BD6833255D6DB472CABF
	Mailing Address PO Box 660351	Date of Disbursement MM / DD / YYYY 09 / 15 / 2009
	City Ogden State UT Zip Code 84201-0001	Amount of Each Disbursement this Period 265.20
	Purpose of Disbursement Payroll Taxes 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) ▼

SUBTOTAL of Disbursements This Page (optional)	934.82
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 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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) Barb Buell</p> <p>Mailing Address PO Box 505</p> <p>City Sioux Falls State SD Zip Code 57101-0505</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B716618F44CFF49C0B47</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="269.36"/></p>
<p>B. Full Name (Last, First, Middle Initial) Sprint</p> <p>Mailing Address Customer Service</p> <p>City Taunton State MA Zip Code 02780</p> <p>Purpose of Disbursement Phone Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B6D1E870A2C694456B98</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="57.74"/></p>
<p>C. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 360002</p> <p>City Fort Lauderdale State FL Zip Code 33336-0002</p> <p>Purpose of Disbursement Credit Card Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BF00F16299B2341C6ACB</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.95"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="353.05"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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 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

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)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) Barb Buell	Transaction ID: B6BAB6060E8F4BB8B0D
	Mailing Address PO Box 505	Date of Disbursement 09 / 30 / 2009
	City Sioux Falls State SD Zip Code 57101-0505	Amount of Each Disbursement this Period 269.36
	Purpose of Disbursement Payroll 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) ▼

B.	Full Name (Last, First, Middle Initial) Christopher Adkins	Transaction ID: B44DD9CC685E848BF919
	Mailing Address 200 N Phillips Ave Ste L101	Date of Disbursement 09 / 30 / 2009
	City Sioux Falls State SD Zip Code 57104-6059	Amount of Each Disbursement this Period 230.88
	Purpose of Disbursement Payroll 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) ▼

C.	Full Name (Last, First, Middle Initial) Angel R Paulson	Transaction ID: B9BC7AA7B19114893A55
	Mailing Address 200 N Phillips Ave Ste L101	Date of Disbursement 09 / 30 / 2009
	City Sioux Falls State SD Zip Code 57104-6059	Amount of Each Disbursement this Period 538.10
	Purpose of Disbursement Payroll 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) ▼

SUBTOTAL of Disbursements This Page (optional)	1038.34
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 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)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) Dane M Bloch	Transaction ID: BF427E79DF25E42BB96A
	Mailing Address 601 E 69th St Apt 129	Date of Disbursement 09 / 30 / 2009
	City Sioux Falls State SD Zip Code 57108-2405	Amount of Each Disbursement this Period 438.75
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) First National Bank	Transaction ID: BEED25D9DEF464D7B97C
	Mailing Address 100 N Phillips Ave	Date of Disbursement 09 / 30 / 2009
	City Sioux Falls State SD Zip Code 57104-6715	Amount of Each Disbursement this Period 2.84
	Purpose of Disbursement Bank Service Fee	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: B9C77561AECE34CEA8C4
	Mailing Address PO Box 360002	Date of Disbursement 07 / 01 / 2009
	City Fort Lauderdale State FL Zip Code 33336-0002	Amount of Each Disbursement this Period 1258.03
	Purpose of Disbursement Credit Card: See Below	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	1699.62
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 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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) 4imprint</p> <p>Mailing Address PO Box 320</p> <p>City Oshkosh State WI Zip Code 54901</p> <p>Purpose of Disbursement PAC Event Totes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BD9E437B22D2B45F9846</p> <p>Date of Disbursement 07 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 412.76</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Aristotle International Inc</p> <p>Mailing Address 205 Pennsylvania Ave SE</p> <p>City Washington State DC Zip Code 20003-1182</p> <p>Purpose of Disbursement Software Support</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BD0023DFAC13A44108C0</p> <p>Date of Disbursement 07 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 510.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 360002</p> <p>City Fort Lauderdale State FL Zip Code 33336-0002</p> <p>Purpose of Disbursement Credit Card Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BC6B1E80552B9472B907</p> <p>Date of Disbursement 07 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 14.76</p> <p>[MEMO ITEM]</p>

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

**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 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)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial)
American Express

Mailing Address PO Box 360002

City Fort Lauderdale State FL Zip Code 33336-0002

Purpose of Disbursement
Credit Card: See Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: B38FE7E69ADC749539C9
Date of Disbursement: 08 / 20 / 2009

Amount of Each Disbursement this Period: 427.14

Category/Type

B. Full Name (Last, First, Middle Initial)
Hyatt Hotel

Mailing Address 400 New Jersey Ave NW

City Washington State DC Zip Code 20001-2002

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: BBEC9AFE01DDB4932B30
Date of Disbursement: 08 / 20 / 2009

Amount of Each Disbursement this Period: 427.14

Category/Type

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Petty Cash

Mailing Address 200 N Phillips Ave Ste L101

City Sioux Falls State SD Zip Code 57104-6059

Purpose of Disbursement
Travel Expenses: See Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: B0DDCE240C6974A86BE7
Date of Disbursement: 07 / 17 / 2009

Amount of Each Disbursement this Period: 200.00

Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶ 627.14

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 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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) Bialek's Music</p> <p>Mailing Address 932 Hungerford Dr # 3</p> <p>City Rockville State MD Zip Code 20850-1713</p> <p>Purpose of Disbursement PAC Event Performer Gratuity</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BC7C8EFCAE5BB4F6F8A8</p> <p>Date of Disbursement 07 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Red Hot & Blue Catering</p> <p>Mailing Address 1701 Clarendon Blvd Ste 105</p> <p>City Arlington State VA Zip Code 22209-2700</p> <p>Purpose of Disbursement PAC Event Server Gratuity</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B24A9BEA6C55F4CEDA8A</p> <p>Date of Disbursement 07 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 60.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) The LS Group</p> <p>Mailing Address 912 F St NW Apt 1106</p> <p>City Washington State DC Zip Code 20004-1451</p> <p>Purpose of Disbursement Reimbursement: See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BE6FA0045AEF74421BF2</p> <p>Date of Disbursement 07 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 145.55</p>

SUBTOTAL of Disbursements This Page (optional)	145.55
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 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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) Angel R Paulson</p> <p>Mailing Address 200 N Phillips Ave Ste L101</p> <p>City Sioux Falls State SD Zip Code 57104-6059</p> <p>Purpose of Disbursement Reimburse Travel: See below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B0215CE63551F44E6BB3</p> <p>Date of Disbursement 07 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 460.00</p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Hyatt Hotel</p> <p>Mailing Address 400 New Jersey Ave NW</p> <p>City Washington State DC Zip Code 20001-2002</p> <p>Purpose of Disbursement Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BEFCC863729C14726846</p> <p>Date of Disbursement 07 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 407.00</p> <p>[MEMO ITEM]</p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 360002</p> <p>City Fort Lauderdale State FL Zip Code 33336-0002</p> <p>Purpose of Disbursement Credit Card: See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B9E57C7D9155F45ADAB8</p> <p>Date of Disbursement 07 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 2992.15</p> <p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>3452.15</p>
<p>TOTAL This Period (last page this line number only)</p>	

**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 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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) Northwest Airlines</p> <p>Mailing Address 7500 Airline Dr</p> <p>City Minneapolis State MN Zip Code 55450-1101</p> <p>Purpose of Disbursement Airline Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BF81FFEC7F82F48128D9</p> <p>Date of Disbursement 07 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 695.80</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Usps</p> <p>Mailing Address Main Post Office</p> <p>City Sioux Falls State SD Zip Code 57104-7500</p> <p>Purpose of Disbursement PAC Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B8965B0965919419889A</p> <p>Date of Disbursement 07 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 1.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Red Hot & Blue Catering</p> <p>Mailing Address 1701 Clarendon Blvd Ste 105</p> <p>City Arlington State VA Zip Code 22209-2700</p> <p>Purpose of Disbursement PAC Event Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B5200B414C5044CDA850</p> <p>Date of Disbursement 07 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 1491.05</p> <p>[MEMO ITEM]</p>

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

**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 60 / 66

<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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 1250 H St NW Ste 100</p> <p>City Washington State DC Zip Code 20005-3952</p> <p>Purpose of Disbursement PAC Event Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B3EF8044B0E7843B0AA0</p> <p>Date of Disbursement 07 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 450.64</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Us Senate Restaurant</p> <p>Mailing Address 1ST & C STREETS NE</p> <p>City Washington State DC Zip Code 20510-0001</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B96C00BA1224348979E2</p> <p>Date of Disbursement 07 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 102.50</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Gevalia</p> <p>Mailing Address PO Box 5276</p> <p>City Clifton State NJ Zip Code 07015-5276</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B02A0379240294168A20</p> <p>Date of Disbursement 07 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 33.75</p> <p>[MEMO ITEM]</p>

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

**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 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)
Heartland Values PAC

<p>A. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 360002</p> <p>City Fort Lauderdale State FL Zip Code 33336-0002</p> <p>Purpose of Disbursement Credit Card: See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BA10967524DB0400AA54</p> <p>Date of Disbursement 09 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 2290.60</p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 1250 H St NW Ste 100</p> <p>City Washington State DC Zip Code 20005-3952</p> <p>Purpose of Disbursement PAC Event Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BF5B9A0AF4C9B445B95B</p> <p>Date of Disbursement 09 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 57.65</p> <p>[MEMO ITEM]</p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Red Hot & Blue Catering</p> <p>Mailing Address 1701 Clarendon Blvd Ste 105</p> <p>City Arlington State VA Zip Code 22209-2700</p> <p>Purpose of Disbursement PAC Event Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BEA672FF6E7724330B95</p> <p>Date of Disbursement 09 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 417.74</p> <p>[MEMO ITEM]</p> <p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>2290.60</p>
<p>TOTAL This Period (last page this line number only)</p>	

**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 62 / 66

<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)
Heartland Values PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Hyatt Hotel</p> <p>Mailing Address 400 New Jersey Ave NW</p> <p>City Washington State DC Zip Code 20001-2002</p> <p>Purpose of Disbursement Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B5C92306400E74A6294F</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="766.79"/></p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Oceanaire</p> <p>Mailing Address 1201 F St NW</p> <p>City Washington State DC Zip Code 20004-1217</p> <p>Purpose of Disbursement PAC Event Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B3B38CEB7A0104569B04</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="807.93"/></p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Fedex</p> <p>Mailing Address 942 S Shady Grove Rd</p> <p>City Memphis State TN Zip Code 38120-4117</p> <p>Purpose of Disbursement Shipping Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B7C8E7466B932452AA6B</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="99.88"/></p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value="76844.93"/></p>

**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)
Heartland Values PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) The Grassley Committee</p> <p>Mailing Address PO Box 1000</p> <p>City Des Moines State IA Zip Code 50304</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Sen. Chuck E. Grassley</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IA District:</p>	<p>Disbursement For: 2010</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BDDF1FDBCE4E5491B918</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) National Republican Senate Committee</p> <p>Mailing Address 425 2nd St NE</p> <p>City Washington State DC Zip Code 20002-4914</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Disbursement For: 2010</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B1B8C853E488C4D08932</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="15000.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Friends of Roy Blunt</p> <p>Mailing Address PO Box 50100</p> <p>City Springfield State MO Zip Code 65805</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Roy Blunt</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MO District: 07</p>	<p>Disbursement For: 2010</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B11C55CFF28964029971</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="25000.00"/>
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)

<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)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) Friends of Trey Grayson <hr/> Mailing Address PO Box 175726 <hr/> City Ft Mitchell State KY Zip Code 41017 <hr/> Purpose of Disbursement Contribution Candidate Name C M Trey Grayson Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BCDE2276014BB45269B5 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) The Grassley Committee <hr/> Mailing Address PO Box 1000 <hr/> City Des Moines State IA Zip Code 50304 <hr/> Purpose of Disbursement Contribution Candidate Name Sen. Chuck E. Grassley Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B35F011CABC3847AABF0 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Ayotte for Senate <hr/> Mailing Address 101 Charles St <hr/> City Manchester State NH Zip Code 03101 <hr/> Purpose of Disbursement Contribution Candidate Name Kelly Ayotte Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B105D5D2C8CDE411F8F8 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
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 65 / 66

<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)
Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)
Portman for Senate

Transaction ID: BED57FFFD809942BEB9A

Date of Disbursement

Mailing Address 9856 Archer Ln

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	0	9

City State Zip Code
Dublin OH 43017

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution

--

Category/
Type

Candidate Name
Robert Portman

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: OH District:

SUBTOTAL of Disbursements This Page (optional) ►

2500.00

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

42500.00

**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 66 / 66

<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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A.	Full Name (Last, First, Middle Initial) South Dakota Republican Party			Transaction ID: B2B6E3B79F4694444960	
	Mailing Address PO Box 1099			Date of Disbursement 07 / 16 / 2009	
City Pierre		State SD	Zip Code 57501-1099		Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement Contribution			Category/ Type		
Candidate Name					
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:					

SUBTOTAL of Disbursements This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	5000.00