

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Pat Murphy for Iowa

ADDRESS (number and street)

PO Box 692

Check if different than previously reported. (ACC)

Dubuque

IA

52004

2. FEC IDENTIFICATION NUMBER ▼

C C00541938

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

IA

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y  
04 / 01 / 2013

through

M M / D D / Y Y Y Y  
06 / 30 / 2013

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 Vicki Krug

Signature of Treasurer Vicki Krug

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
07 / 15 / 2013

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 3  
(Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Pat Murphy for Iowa**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	81923.00	149993.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	81923.00	149993.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	17739.21	25942.01
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	17739.21	25942.01
8. Cash on Hand at Close of Reporting Period (from Line 27).....	124039.13	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Pat Murphy for Iowa**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	38750.00	78889.00
(ii) Unitemized.....	39173.00	59309.00
(iii) TOTAL of contributions from individuals ▶	77923.00	138198.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	500.00	750.00
(d) The Candidate.....	3500.00	11045.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	81923.00	149993.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	81923.00	149993.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	17739.21	25942.01
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	11.86	11.86
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	17751.07	25953.87

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	59867.20
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	81923.00
25. SUBTOTAL (add Line 23 and Line 24).....	141790.20
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	17751.07
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	124039.13

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Abu Nawas Beverage Company**

Mailing Address 111 N. Main Street

City Elkader State IA Zip Code 52043-7700

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 01 / 2013

**Transaction ID : VN8F99S6A53**

Amount of Each Receipt this Period  
 500.00

PARTNERSHIP--partners below if itemized

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

Mailing Address 111 N. Main PO Box 1

City Elkader State IA Zip Code 52043-7700

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

Name of Employer Occupation  
 Abu Nawas Beverage Company LLC owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 10 / 2013

**Transaction ID : VN8F99S6A78**

Amount of Each Receipt this Period  
 500.00

**[MEMO ITEM]**  
\*

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

Mailing Address 1634 NW 131st St

City Clive State IA Zip Code 50325-7448

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

Name of Employer Occupation  
 Iowa Healthcare Association Treasurer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 17 / 2013

**Transaction ID : VN8F9A6P5Y5**

Amount of Each Receipt this Period  
 500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Lloyd Aller**

Mailing Address 1089 Cedar Woods Rd

City Cedar Rapids State IA Zip Code 52403-9046

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

Name of Employer Alliant Energy Investments Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2013

**Transaction ID : VN8F9A10AV8**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 722 June Dr

City Dubuque State IA Zip Code 52003-0310

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

Name of Employer Mystique Casino Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2013

**Transaction ID : VN8F9AAD6Y6**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 195 E Dovetail Dr

City Coralville State IA Zip Code 52241-3356

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

Name of Employer University of Iowa Occupation University Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2013

**Transaction ID : VN8F9A6PE65**

Amount of Each Receipt this Period  
250.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Carol Elaine Berg**

Mailing Address 1399 43rd St SE

City	State	Zip Code
Cedar Rapids	IA	52403-3968

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

Name of Employer	Occupation
YMCA/Self Employed	Yoga Instructure

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 20 / 2013

**Transaction ID : VN8F9A73ZX5**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

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

Mailing Address 532 W Heller Dr

City	State	Zip Code
East Dubuque	IL	61025-9531

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

Name of Employer	Occupation
President	East Dubuque Savings Bank

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2013

**Transaction ID : VN8F9A702E1**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

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

Mailing Address 500 Tanglewood Dr

City	State	Zip Code
Manchester	IA	52057-1268

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

Name of Employer	Occupation
BOOM R RIED MD	Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2013

**Transaction ID : VN8F99SVBH5**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

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

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

\_\_\_\_\_ 1000.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Arden L Borgen**

Mailing Address 2504 Forest Dr

City State Zip Code  
Des Moines IA 50312-5410

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

Name of Employer Occupation  
Borgen Systems CEO/ co-Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2013

**Transaction ID : VN8F9A9TXW9**

Amount of Each Receipt this Period  
250.00

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

Mailing Address PO Box 515

City State Zip Code  
Cresco IA 52136-0515

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2013

**Transaction ID : VN8F99SVB60**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 408 3rd St SE

City State Zip Code  
Washington DC 20003-1930

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

Name of Employer Occupation  
DLCC Political Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2890.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : VN8F9AA8Y67**

Amount of Each Receipt this Period  
250.00

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

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

750.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Jacob Braun**

Mailing Address 4009 N Kenmore Ave  
Apt 1

City Chicago State IL Zip Code 60613-2037

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

Name of Employer Resolute Consulting Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2013

**Transaction ID : VN8F99TXDN1**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1432 S Grandview Ave

City Dubuque State IA Zip Code 52003-8733

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2013

**Transaction ID : VN8F9A702J2**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 2327 Salem Ct

City Bettendorf State IA Zip Code 52722-3136

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

Name of Employer William J. Bribriesco & Associates Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2013

**Transaction ID : VN8F9A2G577**

Amount of Each Receipt this Period  
250.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Gail F Brown**

Mailing Address 18486 Vine Ave

City Mason City	State IA	Zip Code 50401-8755
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2013

**Transaction ID : VN8F99NW5E8**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 604 S 32nd St

City Clinton	State IA	Zip Code 52732-9444
-----------------	-------------	------------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 01 / 2013

**Transaction ID : VN8F9A2MJ76**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 565 Woodland Rdg

City Dubuque	State IA	Zip Code 52003-6735
-----------------	-------------	------------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 22 / 2013

**Transaction ID : VN8F99NJ7F3**

Amount of Each Receipt this Period  
250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A. James W Carney**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 303 Locust St  
 Ste 400  
 City Des Moines State IA Zip Code 50309-1770  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Carney, Appleby, Nielsen & Skinner Occupation Attorney  
 Receipt For: 2014  
 Primary  General  
 Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 21 / 2013  
**Transaction ID : VN8F9A76RD7**  
 Amount of Each Receipt this Period  
 300.00  
 Election Cycle-to-Date  
 300.00

**B. E. Michael Carr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 333  
 City Manchester State IA Zip Code 52057-0333  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Carr & Carr Occupation Attorney  
 Receipt For: 2014  
 Primary  General  
 Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 07 / 2013  
**Transaction ID : VN8F91GYG79**  
 Amount of Each Receipt this Period  
 250.00  
 Election Cycle-to-Date  
 250.00

**C. Alicia P Claypool**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5754 Gallery Ct  
 City West Des Moines State IA Zip Code 50266-6629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Interfaith Alliance of Iowa Occupation Executive Director  
 Receipt For: 2014  
 Primary  General  
 Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 17 / 2013  
**Transaction ID : VN8F99SRD93**  
 Amount of Each Receipt this Period  
 250.00  
 Election Cycle-to-Date  
 250.00

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Roxanne Barton Conlin**

Mailing Address 2900 Southern Hills Cir

City	State	Zip Code
Des Moines	IA	50321-1458

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

Name of Employer	Occupation
Roxanne Conlin and Associates P. C.	Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2013

**Transaction ID : VN8F9AA1W84**

Amount of Each Receipt this Period

1000.00

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

Mailing Address 3808 NE 7th Ave

City	State	Zip Code
Portland	OR	97212-1131

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

Name of Employer	Occupation
Bd of Medical Imaging State of Oregon	Exec Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2013

**Transaction ID : VN8F9A9YAV0**

Amount of Each Receipt this Period

500.00

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

Mailing Address 1205 Adeline St

City	State	Zip Code
Dubuque	IA	52003-8726

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

Name of Employer	Occupation
Heartland Financial	Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2013

**Transaction ID : VN8F9A703D5**

Amount of Each Receipt this Period

250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Barbara Crowley**

Mailing Address 7955 Wistful Vista Dr  
Unit 53

City West Des Moines State IA Zip Code 50266-8041

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

Name of Employer Brokers Clearing House, Ltd Occupation President and CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : VN8F9AA73Z7**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2002 N B St

City Fairfield State IA Zip Code 52556-2032

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

Name of Employer Event Photography Group Occupation Photographer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 30 / 2013

**Transaction ID : VN8F99W9G14**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 3113 Kinsey Ave

City Des Moines State IA Zip Code 50317-6603

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

Name of Employer State of Iowa Occupation State Senator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2013

**Transaction ID : VN8F99SVBA2**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Patricia J Denson**

Mailing Address 3603 SW Court Ave

City Ankeny State IA Zip Code 50023-9214

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 15 / 2013

**Transaction ID : VN8F99SF8C4**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 710 NW Ash Dr

City Ankeny State IA Zip Code 50023-1549

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

Name of Employer Self Occupation Government Finance Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 13 / 2013

**Transaction ID : VN8F99S9DW5**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 505 5th Ave Ste 333

City Des Moines State IA Zip Code 50309-2322

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

Name of Employer Environmental Law & Policy Center Occupation Policy Advocate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 15 / 2013

**Transaction ID : VN8F9A6N041**

Amount of Each Receipt this Period  
100.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas H Fey**

Mailing Address 5608 Kensington Cir

City Johnston State IA Zip Code 50131-1295

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

Name of Employer Fey & Gomez Inc Occupation Lobbyist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 29 / 2013**

**Transaction ID : VN8F9AAD6N4**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 4110 Forest Ave

City Des Moines State IA Zip Code 50311-2539

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

Name of Employer State of Iowa Occupation Research

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : VN8F9AAFMD8**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 1139 46th St

City Des Moines State IA Zip Code 50311-3309

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

Name of Employer Prairie Legislative Services Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 21 / 2013**

**Transaction ID : VN8F9A760S9**

Amount of Each Receipt this Period  
**500.00**

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

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

**800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**John Forbes**

Mailing Address 12816 Cardinal Ln

City Urbandale State IA Zip Code 50323-2154

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

Name of Employer Medicap Pharmacy Occupation Pharmacist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 24 / 2013**

**Transaction ID : VN8F9A9TY00**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 15520 Bobby Ln

City Council Bluffs State IA Zip Code 51503-5815

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

Name of Employer IAT Group Occupation V.P.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 03 / 2013**

**Transaction ID : VN8F9A10AD8**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Edward B Friedmann Jr.**

Mailing Address 13964 Delta Cir # C

City Redfield State IA Zip Code 50233-6106

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

Name of Employer Redfield Medical Clinic Occupation PA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 01 / 2013**

**Transaction ID : VN8F99NZA87**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1750.00**



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

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

FOR LINE NUMBER: PAGE 17 OF 60  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Alfred Friedrichsen**

Mailing Address 6139 330th St

City State Zip Code  
Ida Grove IA 51445-8141

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : VN8F99Q0NE5**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 3729 Kingman Blvd

City State Zip Code  
Des Moines IA 50311-3626

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

Name of Employer Occupation  
State of Iowa Executive Officer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2013

**Transaction ID : VN8F9A2WA15**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 14 E Charles St

City State Zip Code  
Oelwein IA 50662-1739

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

Name of Employer Occupation  
RFSW and Co. CPA

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2013

**Transaction ID : VN8F9A9TSZ3**

Amount of Each Receipt this Period  
250.00

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

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

950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**William J Gannon**

Mailing Address 205 E Bluff St  
# 167

City Mingo State IA Zip Code 50168-7720

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

Name of Employer Farmer's Supply Store, Inc. Occupation Retired Owner/ Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 29 / 2013

**Transaction ID : VN8F99NW5Q9**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1095 Mount Pleasant St

City Dubuque State IA Zip Code 52001-6137

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2013

**Transaction ID : VN8F9A75ZY8**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 414 Bryan Rd

City Ottumwa State IA Zip Code 52501-1107

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 29 / 2013

**Transaction ID : VN8F99NW5S5**

Amount of Each Receipt this Period  
250.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Dean A Genth**

Mailing Address 145 Pebble Creek Dr

City Mason City	State IA	Zip Code 50401-8927
--------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2013

**Transaction ID : VN8F9A9T4Y2**

Amount of Each Receipt this Period  
20.00

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

Mailing Address 145 Pebble Creek Dr

City Mason City	State IA	Zip Code 50401-8927
--------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2013

**Transaction ID : VN8F9A9T507**

Amount of Each Receipt this Period  
230.00

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

Mailing Address 191 University Blvd  
# 266

City Denver	State CO	Zip Code 80206-4613
----------------	-------------	------------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2013

**Transaction ID : VN8F9AAD658**

Amount of Each Receipt this Period  
1500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Francis Giunta**

Mailing Address 2397 Matthew John Dr  
# H

City State Zip Code  
Dubuque IA 52002-2887

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
950.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2013

**Transaction ID : VN8F9AA9QB9**

Amount of Each Receipt this Period  
450.00

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

Mailing Address 2397 Matthew John Dr

City State Zip Code  
Dubuque IA 52002-2887

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

Name of Employer Occupation  
Dubuque Radiology Business Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
950.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2013

**Transaction ID : VN8F9AA9Q61**

Amount of Each Receipt this Period  
450.00

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

Mailing Address 1306 Tomahawk Dr

City State Zip Code  
Dubuque IA 52003-7878

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

Name of Employer Occupation  
Goodmann Insurance Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 27 / 2013

**Transaction ID : VN8F9AA7235**

Amount of Each Receipt this Period  
250.00

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

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

1150.00

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

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

FOR LINE NUMBER: PAGE 21 OF 60  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Lynn Graves**

Mailing Address 65 Fox Lndg

City State Zip Code  
Waukee IA 50263-9538

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2013

**Transaction ID : VN8F9A13K89**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 825 17th St SE

City State Zip Code  
Cedar Rapids IA 52403-2609

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2013

**Transaction ID : VN8F9A6P7K2**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 3570 Crescent Rdg

City State Zip Code  
Dubuque IA 52003-5235

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

Name of Employer Occupation  
Gilloon, Wright & Hamel, P.C. Attorney

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2013

**Transaction ID : VN8F9A4R0J0**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Curt Hanson**

Mailing Address 801 N Court St

City State Zip Code  
Fairfield IA 52556-2235

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

Name of Employer Occupation  
State of Iowa Legislature

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**325.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 27 / 2013**

**Transaction ID : VN8F9AA88X0**

Amount of Each Receipt this Period  
**75.00**

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

Mailing Address 17962 224th St

City State Zip Code  
Manchester IA 52057-8644

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

Name of Employer Occupation  
Dickinson Law Office Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 22 / 2013**

**Transaction ID : VN8F99NJ7E5**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 6750 School St  
Unit 1402

City State Zip Code  
Des Moines IA 50324-1651

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 18 / 2013**

**Transaction ID : VN8F99HYC84**

Amount of Each Receipt this Period  
**250.00**

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

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

**575.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Donna M Hefel**

Mailing Address 11094 212th Ave

City Maquoketa State IA Zip Code 52060-8742

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 22 / 2013**

**Transaction ID : VN8F9A9TXR7**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 615 S Marshall St

City Boone State IA Zip Code 50036-5112

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 03 / 2013**

**Transaction ID : VN8F99Q0N38**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 2300 Terrace Rd

City Des Moines State IA Zip Code 50312-5430

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

Name of Employer Evergreen Estates Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 11 / 2013**

**Transaction ID : VN8F99HP194**

Amount of Each Receipt this Period  
**500.00**

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

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

**950.00**

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

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

FOR LINE NUMBER: PAGE 24 OF 60  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**James W Hubbell III**

Mailing Address 2854 Druid Hill Dr

City State Zip Code  
Des Moines IA 50315-1845

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

Name of Employer Occupation  
Hubbell Realty Chairman of the Board

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 08 / 2013

**Transaction ID : VN8F99HG2G3**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Irving F Jensen Jr.**

Mailing Address 4320 Perry Way

City State Zip Code  
Sioux City IA 51104-1124

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2013

**Transaction ID : VN8F99NW5A7**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 3127 Thompson Ave

City State Zip Code  
Des Moines IA 50317-3145

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 06 / 2013

**Transaction ID : VN8F99Q2DT9**

Amount of Each Receipt this Period  
250.00

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

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

1750.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Jack P. Kibbie**

Mailing Address **PO Box 190**

City **Emmetsburg** State **IA** Zip Code **50536-0190**

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

Name of Employer **State of Iowa/Self** Occupation **St. Senator/Farmer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 22 / 2013**

**Transaction ID : VN8F99NJ7D7**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **39901 Foothill Ave**

City **Saint Ansgar** State **IA** Zip Code **50472-8692**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 24 / 2013**

**Transaction ID : VN8F99NRF98**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **3617 Crescent Rdg**

City **Dubuque** State **IA** Zip Code **52003-5239**

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

Name of Employer **Walmart** Occupation **Department Manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**275.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 13 / 2013**

**Transaction ID : VN8F99HTZ66**

Amount of Each Receipt this Period  
**25.00**

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

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

**525.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Donna Krug**

Mailing Address 3617 Crescent Rdg

City State Zip Code  
Dubuque IA 52003-5239

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

Name of Employer Occupation  
Walmart Department Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 15 / 2013

**Transaction ID : VN8F99SF809**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 3617 Crescent Rdg

City State Zip Code  
Dubuque IA 52003-5239

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

Name of Employer Occupation  
Walmart Department Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
325.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 14 / 2013

**Transaction ID : VN8F9A4Q0Q1**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 3617 Crescent Rdg

City State Zip Code  
Dubuque IA 52003-5239

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

Name of Employer Occupation  
McGraw-Hill Education Content Project Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 13 / 2013

**Transaction ID : VN8F99HTYK6**

Amount of Each Receipt this Period  
25.00

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

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

75.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Vicki Krug**

Mailing Address 3617 Crescent Rdg

City Dubuque State IA Zip Code 52003-5239

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

Name of Employer McGraw-Hill Education Occupation Content Project Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 15 / 2013

**Transaction ID : VN8F99SF7Z3**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 3617 Crescent Rdg

City Dubuque State IA Zip Code 52003-5239

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

Name of Employer McGraw-Hill Education Occupation Content Project Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 14 / 2013

**Transaction ID : VN8F9A4Q481**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 105 Mitchel Ct

City Anamosa State IA Zip Code 52205-8202

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 21 / 2013

**Transaction ID : VN8F9A75WR4**

Amount of Each Receipt this Period  
**250.00**

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

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

**300.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Beth Lawler**

Mailing Address 111 Foster Blvd

City Iowa Falls State IA Zip Code 50126-1906

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2013

**Transaction ID : VN8F99Q2DK4**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 3313 Sedwick St

City Ames State IA Zip Code 50010-1157

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

Name of Employer McFarland Clinic Occupation Doctor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2013

**Transaction ID : VN8F9A6TCG3**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 111 E 3rd St Ste 700

City Davenport State IA Zip Code 52801-1524

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

Name of Employer Self employed Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 03 / 2013

**Transaction ID : VN8F91GT2N0**

Amount of Each Receipt this Period  
 250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Sharon Malheiro**

Mailing Address 3514 SW 33rd St

City Des Moines State IA Zip Code 50321-1952

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

Name of Employer Davis Brown Law Firm Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 10 / 2013

**Transaction ID : VN8F9A2Y042**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1400 S Grandview Ave

City Dubuque State IA Zip Code 52003-8733

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : VN8F9AA6YX2**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 5005 160th St NE

City Solon State IA Zip Code 52333-9035

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 23 / 2013

**Transaction ID : VN8F99TSS57**

Amount of Each Receipt this Period  
250.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Michael McBurnie**

Mailing Address **PO Box 72**

City **Nederland** State **CO** Zip Code **80466-0072**

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

Name of Employer **MyTherapyCompany** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 04 / 2013**

**Transaction ID : VN8F9A2E657**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **3914 72nd St**

City **Urbandale** State **IA** Zip Code **50322-2602**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 27 / 2013**

**Transaction ID : VN8F9AA8776**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **2107 W Bremer Ave**

City **Waverly** State **IA** Zip Code **50677-2032**

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

Name of Employer **New Aldaya Lifescape** Occupation **Nurse**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 11 / 2013**

**Transaction ID : VN8F9A32JC5**

Amount of Each Receipt this Period  
**200.00**

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

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

**1200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Robyn Mills**

Mailing Address 5360 NW Burr Oak Dr

City	State	Zip Code
Johnston	IA	50131-1710

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

Name of Employer	Occupation
Alzheimer's Association	Public Relations Coordinator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2013

**Transaction ID : VN8F9A10B65**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 36 High Circle Dr NE

City	State	Zip Code
Iowa City	IA	52240-7935

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

Name of Employer	Occupation
University of Iowa	Medical Scientist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 29 / 2013

**Transaction ID : VN8F99W44A1**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 5411 Robertson Dr

City	State	Zip Code
Des Moines	IA	50312-2135

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

Name of Employer	Occupation
Higher Education Partners, LLC	CFO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 26 / 2013

**Transaction ID : VN8F99NSV50**

Amount of Each Receipt this Period  
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Barney A Murphy**

Mailing Address 307 N 11th St

City Dunlap State IA Zip Code 51529-1211

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

Name of Employer Occupation  
City of Dunlap Mayor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2013

**Transaction ID : VN8F9A2XYM5**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 2380 Chaney Rd  
Unit 3

City Dubuque State IA Zip Code 52001-3085

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

Name of Employer Occupation  
Hills and Dales Nurse

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1137.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2013

**Transaction ID : VN8F9A2Y068**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 531 6th St NW

City Oelwein State IA Zip Code 50662-1153

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

Name of Employer Occupation  
L&L Murphy Assoc., Consult Public Affairs Consulting/Lobbying

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2013

**Transaction ID : VN8F99Q0DX8**

Amount of Each Receipt this Period  
125.00

\* In-Kind: Office space

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

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

775.00



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

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

FOR LINE NUMBER: PAGE 33 OF 60  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Larry Murphy**

Mailing Address 531 6th St NW

City State Zip Code  
Oelwein IA 50662-1153

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

Name of Employer Occupation  
L&L Murphy Assoc., Consult Public Affairs Consulting/Lobbying

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**875.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 01 / 2013**

**Transaction ID : VN8F99Q0E19**

Amount of Each Receipt this Period  
**125.00**

\* In-Kind: Office space

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

Mailing Address 387 Kaufmann Ave

City State Zip Code  
Dubuque IA 52001-3213

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

Name of Employer Occupation  
Hillcrest Family Center Teacher

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 29 / 2013**

**Transaction ID : VN8F9AADCFO**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 2346 Poplar St

City State Zip Code  
Dubuque IA 52001-4135

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

Name of Employer Occupation  
Medical Associates Nurse

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 29 / 2013**

**Transaction ID : VN8F9AADCK1**

Amount of Each Receipt this Period  
**500.00**

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

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

**725.00**

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

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

FOR LINE NUMBER: PAGE 34 OF 60  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Michael E. Myszewski**

Mailing Address 3708 Southern Hills Dr

City State Zip Code  
Des Moines IA 50321-1325

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 26 / 2013

**Transaction ID : VN8F99NTQV3**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 114 McKenzie Cir

City State Zip Code  
Council Bluffs IA 51503-0599

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

Name of Employer Occupation  
ISEA President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : VN8F9AA9Q45**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 3841 Falbrook Dr NE

City State Zip Code  
Cedar Rapids IA 52402-2756

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

Name of Employer Occupation  
Rockwell Collins Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 25 / 2013

**Transaction ID : VN8F99TX1Q0**

Amount of Each Receipt this Period  
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Ryan Offutt**

Mailing Address 700 7th St S

City State Zip Code  
Fargo ND 58103-2704

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

Name of Employer Occupation  
RDO Equipment Co. Executive Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 06 / 2013

**Transaction ID : VN8F9A2M3Q0**

Amount of Each Receipt this Period  
400.00

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

Mailing Address 110 Timber Ln

City State Zip Code  
Ackworth IA 50001-9663

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

Name of Employer Occupation  
State of Iowa Legislature

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 29 / 2013

**Transaction ID : VN8F9AAHV03**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1420 Potomac Ave SE

City State Zip Code  
Washington DC 20003-3032

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

Name of Employer Occupation  
The Pivot Group Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 06 / 2013

**Transaction ID : VN8F9A2MJH5**

Amount of Each Receipt this Period  
150.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Patterson**

Mailing Address **PO Box 976**

City **Des Moines** State **IA** Zip Code **50304-0976**

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

Name of Employer **House Research Staff** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 12 / 2013**

**Transaction ID : VN8F9A32KJ5**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **4300 Beaver Hills Dr**

City **Des Moines** State **IA** Zip Code **50310-6300**

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

Name of Employer **State of Iowa** Occupation **Legislature**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 27 / 2013**

**Transaction ID : VN8F9AA88R1**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address **PO Box 8428**

City **Des Moines** State **IA** Zip Code **50301-8428**

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

Name of Employer **DLCC** Occupation **Campaign Staff**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 24 / 2013**

**Transaction ID : VN8F9A9TWC0**

Amount of Each Receipt this Period  
**500.00**

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

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

**1050.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Dorinda L Pounds**

Mailing Address 403 Olive St

City Cedar Falls State IA Zip Code 50613-2520

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

Name of Employer Midwest Contractors, Inc. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : VN8F99SRDC7**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 4888 School House Rd

City Bettendorf State IA Zip Code 52722-6576

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 03 / 2013

**Transaction ID : VN8F91FNRX7**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 2995 Arbor Hills Dr

City Dubuque State IA Zip Code 52001-9007

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

Name of Employer Miller-Purcell, Inc Occupation Pharmacist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 23 / 2013

**Transaction ID : VN8F99TSS99**

Amount of Each Receipt this Period  
 250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Janice A Reinicke**

Mailing Address 7901 Roseland Dr

City State Zip Code  
Des Moines IA 50322-4469

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 10 / 2013

**Transaction ID : VN8F99HG2D9**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 6857 Morningside Cir

City State Zip Code  
Johnston IA 50131-1248

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

Name of Employer Occupation  
State of Iowa Director, Iowa House Democratic Resear

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 15 / 2013

**Transaction ID : VN8F99SF8A8**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 703 3rd St E

City State Zip Code  
Cresco IA 52136-1125

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

Name of Employer Occupation  
Self-employed Bookseller

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 02 / 2013

**Transaction ID : VN8F99PXEZ2**

Amount of Each Receipt this Period  
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Steven Schoenebaum**

Mailing Address 1671 NW 132nd St

City Clive State IA Zip Code 50325-8518

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

Name of Employer Brown, Winick & Graves Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2013

**Transaction ID : VN8F9A760C9**

Amount of Each Receipt this Period  
 350.00

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

Mailing Address 169 140th Ave

City Monroe State IA Zip Code 50170-7542

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

Name of Employer State of Iowa Occupation Administrative Assistant to Minority L

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 10 / 2013

**Transaction ID : VN8F99S6AB0**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 701 Hilltop Dr

City Decorah State IA Zip Code 52101-1007

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

Name of Employer Hacker, Nelson & Co. Occupation CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : VN8F99SRDE3**

Amount of Each Receipt this Period  
 250.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Jeffrey W Scott**

Mailing Address **PO Box 188**

City **Fayette** State **IA** Zip Code **52142-0188**

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

Name of Employer **Scott Pharmacy** Occupation **Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2013**

**Transaction ID : VN8F9AA9PX0**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **3660 Grand Ave  
Unit 210**

City **Des Moines** State **IA** Zip Code **50312-4348**

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

Name of Employer **S&A** Occupation **Architect**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 29 / 2013**

**Transaction ID : VN8F99NW5T3**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **8131 Wellington Blvd**

City **Johnston** State **IA** Zip Code **50131-8740**

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

Name of Employer **Self-Employed** Occupation **Lobbist/Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 03 / 2013**

**Transaction ID : VN8F9A10AQ7**

Amount of Each Receipt this Period  
**250.00**

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

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

**1000.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Smith**

Mailing Address 816 Roberts Ter

City Marshalltown State IA Zip Code 50158-4327

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

Name of Employer State of Iowa Occupation Legislature

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 12 / 2013

**Transaction ID : VN8F9A30J54**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 823 Ashwood Dr

City Huxley State IA Zip Code 50124-9316

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

Name of Employer State of Iowa Occupation Physician

McFarland Clinic

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 24 / 2013

**Transaction ID : VN8F99NRCJ3**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 3524 Grand Ave  
Unit 101

City Des Moines State IA Zip Code 50312-4315

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

Name of Employer State of Iowa Occupation Homemaker

N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 13 / 2013

**Transaction ID : VN8F99S9DV7**

Amount of Each Receipt this Period  
**250.00**

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

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

**700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Roger Stewart**

Mailing Address 3936 317th Ave

City Preston State IA Zip Code 52069-9333

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

Name of Employer State of Iowa Occupation State Senator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : VN8F9AA8837**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 460 Summit St

City Dubuque State IA Zip Code 52001-6651

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2013

**Transaction ID : VN8F9AA6X91**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 1126 12th St SE Apt 3

City Dyersville State IA Zip Code 52040

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

Name of Employer Go the Distance Baseball Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : VN8F9AAE4S9**

Amount of Each Receipt this Period  
**500.00**

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

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

**575.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Maura I Strassberg**

Mailing Address 1430 Broad St

City Grinnell State IA Zip Code 50112-1421

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

Name of Employer Drake University Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2013

**Transaction ID : VN8F9AA1J25**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 145 Pebble Creek Dr

City Mason City State IA Zip Code 50401-8927

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

Name of Employer Radiologists of North Iowa Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : VN8F9AA71T4**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Systematic Investment Partners, LLC**

Mailing Address 13936 Oak Brook Dr

City Urbandale State IA Zip Code 50323-2134

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 04 / 2013

**Transaction ID : VN8F99S6BJ8**

Amount of Each Receipt this Period  
250.00

PARTNERSHIP--partners below if itemized

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Mukesh Tayal**

Mailing Address 13936 Oak Brook Dr

City Urbandale State IA Zip Code 50323-2134

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

Name of Employer Systematic Investment Partners LLC Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 04 / 2013

**Transaction ID : VN8F99Q2DH8**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
\*

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

Mailing Address 3913 Carlton Dr

City Cedar Falls State IA Zip Code 50613-5767

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : VN8F9AAEY57**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 6721 Augustine Ct

City Johnston State IA Zip Code 50131-4700

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2013

**Transaction ID : VN8F9A32KG9**

Amount of Each Receipt this Period  
250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Roger Thomas**

Mailing Address 17658 Domino Rd

City Elkader State IA Zip Code 52043-8206

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

Name of Employer State of Iowa Occupation Legislature

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 11 / 2013

**Transaction ID : VN8F9A32JN6**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 3427 Holmead PI NW

City Washington State DC Zip Code 20010-3468

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

Name of Employer National Nurses United Occupation Labor Representative

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 15 / 2013

**Transaction ID : VN8F99HTNJ9**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 622 Greenwich St Apt 2C

City New York State NY Zip Code 10014-3305

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

Name of Employer Skadden, Arps et al LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 23 / 2013

**Transaction ID : VN8F9A8R7E1**

Amount of Each Receipt this Period  
**500.00**

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

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

**600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 60
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Anne Webber**

Mailing Address 1275 16th St

City State Zip Code  
West Des Moines IA 50265-2312

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

Name of Employer Occupation  
ChildServe Case Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 20 / 2013

**Transaction ID : VN8F99SVBR0**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 105 E Pearl St

City State Zip Code  
Decorah IA 52101-2271

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

Name of Employer Occupation  
Northeast Iowa Community College President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2013

**Transaction ID : VN8F9A32KH7**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 404 SW Country Club Ln

City State Zip Code  
Ankeny IA 50023-9675

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

Name of Employer Occupation  
Wells Fargo Advsiors Investments

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 15 / 2013

**Transaction ID : VN8F99SF8D2**

Amount of Each Receipt this Period  
500.00

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 47 OF 60  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Lorrie Whitaker**

Mailing Address 1212 W Broadway St

City Polk City      State IA      Zip Code 50226-1005

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

Name of Employer North Polk CSD      Occupation Teacher (substitute)

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2013

**Transaction ID : VN8F9A76RC9**

Amount of Each Receipt this Period  
 150.00

650.00

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

Mailing Address 108 Hillside Dr E

City Oelwein      State IA      Zip Code 50662-2637

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

Name of Employer None      Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2013

**Transaction ID : VN8F9A760M0**

Amount of Each Receipt this Period  
 250.00

250.00

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

Mailing Address

City      State      Zip Code

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

Name of Employer      Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

400.00

38750.00

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

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

FOR LINE NUMBER: PAGE 48 OF 60  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**LKQ CORPORATION EMPLOYEE GOOD GOVERNMENT FUND**

Mailing Address 5975 N Federal Hwy  
Ste 130

City Fort Lauderdale State FL Zip Code 33308-2687

FEC ID number of contributing federal political committee. **C** C00458158

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 27 / 2013

**Transaction ID : VN8F9AA7516**

Amount of Each Receipt this Period  
500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 60
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A.** Full Name (Last, First, Middle Initial)  
**Patrick J Murphy**

Mailing Address 155 N Grandview Ave

City Dubuque State IA Zip Code 52001-6325

FEC ID number of contributing federal political committee. **C** H4IA01069

Name of Employer State of Iowa Occupation State Representative

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
11045.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : VN8F9AAJ070**

Amount of Each Receipt this Period  
3500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

3500.00

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

Full Name (Last, First, Middle Initial) <b>A. Adcraft Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2013
Mailing Address 309 5th Ave SE		Amount of Each Disbursement this Period 2189.22
City Cedar Rapids	State IA Zip Code 52401-1801	
Purpose of Disbursement Printing	Category/Type 006	<b>Transaction ID : VN7G18EC13</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Carter Printing Company</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2013
Mailing Address 1739 E Grand Ave		Amount of Each Disbursement this Period 397.10
City Des Moines	State IA Zip Code 50316-3611	
Purpose of Disbursement Mailing	Category/Type 003	<b>Transaction ID : VN7G18EC21</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Charles Denson</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2013
Mailing Address 155 N Grandview Ave		Amount of Each Disbursement this Period 996.37
City Dubuque	State IA Zip Code 52001-6325	
Purpose of Disbursement Payroll	Category/Type	<b>Transaction ID : VN7G18EPZ0</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3582.69
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 60			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

Full Name (Last, First, Middle Initial) <b>A. Charles Denson</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2013
Mailing Address 155 N Grandview Ave		Amount of Each Disbursement this Period 996.38 <b>Transaction ID : VN7G19HEPJ0</b>
City Dubuque	State IA	
Zip Code 52001-6325	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Charles Denson</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2013
Mailing Address 155 N Grandview Ave		Amount of Each Disbursement this Period 996.37 <b>Transaction ID : VN7G19HNZR0</b>
City Dubuque	State IA	
Zip Code 52001-6325	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Charles Denson</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2013
Mailing Address 155 N Grandview Ave		Amount of Each Disbursement this Period 368.70 <b>Transaction ID : VN7G19HZBH2</b>
City Dubuque	State IA	
Zip Code 52001-6325	Purpose of Disbursement Health insurance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2361.45
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 60			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

Full Name (Last, First, Middle Initial) <b>A. Wellmark, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2013
Mailing Address 1331 Grand Ave PO Box 9232		Amount of Each Disbursement this Period 368.15
City Des Moines	State IA Zip Code 50309-2901	
Purpose of Disbursement Health insurance	Category/Type	Transaction ID : VN7G19J0P57
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Charles Denson</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2013
Mailing Address 155 N Grandview Ave		Amount of Each Disbursement this Period 996.38
City Dubuque	State IA Zip Code 52001-6325	
Purpose of Disbursement Payroll	Category/Type 001	Transaction ID : VN7G19J0MW5
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Charles Denson</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2013
Mailing Address 155 N Grandview Ave		Amount of Each Disbursement this Period 996.37
City Dubuque	State IA Zip Code 52001-6325	
Purpose of Disbursement Payroll	Category/Type 001	Transaction ID : VN7G19J3YX7
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1992.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

Full Name (Last, First, Middle Initial) <b>A. Charles Denson</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2013
Mailing Address 155 N Grandview Ave		Amount of Each Disbursement this Period 225.75
City Dubuque	State IA	
Zip Code 52001-6325	Purpose of Disbursement Health insurance	<b>Transaction ID : VN7G19J3Z19</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wellmark, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2013
Mailing Address 1331 Grand Ave PO Box 9232		Amount of Each Disbursement this Period 225.75
City Des Moines	State IA	
Zip Code 50309-2901	Purpose of Disbursement Health insurance	<b>Transaction ID : VN7G19J3Z27</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Charles Denson</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2013
Mailing Address 155 N Grandview Ave		Amount of Each Disbursement this Period 996.38
City Dubuque	State IA	
Zip Code 52001-6325	Purpose of Disbursement Payroll	<b>Transaction ID : VN7G19J6VM3</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1222.13
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

Full Name (Last, First, Middle Initial) <b>A. Drahozal Law Office, P.C.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 28 / 2013</b>
Mailing Address 800 White St Ste 100		Amount of Each Disbursement this Period <b>420.00</b> <b>Transaction ID : VN7G19JARA0</b>
City Dubuque State IA Zip Code 52001-7001	Purpose of Disbursement Legal fees Candidate Name Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. First Data Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 07 / 2013</b>
Mailing Address 1307 Walt Whitman Rd		Amount of Each Disbursement this Period <b>498.96</b> <b>Transaction ID : VN7G18ER92</b>
City Melville State NY Zip Code 11747-3011	Purpose of Disbursement Credit card processing fees Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. First Data Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 03 / 2013</b>
Mailing Address 1307 Walt Whitman Rd		Amount of Each Disbursement this Period <b>229.61</b> <b>Transaction ID : VN7G19HP0A2</b>
City Melville State NY Zip Code 11747-3011	Purpose of Disbursement Credit card processing fees Candidate Name Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1148.57</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 60			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

**A. First Data Merchant Services**

Full Name (Last, First, Middle Initial)  
Mailing Address 1307 Walt Whitman Rd

City Melville State NY Zip Code 11747-3011

Purpose of Disbursement  
Credit card processing fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
06 / 03 / 2013

Amount of Each Disbursement this Period  
194.00

Transaction ID : VN7G19J30C0

Category/Type  
001

**B. Internal Revenue Service**

Full Name (Last, First, Middle Initial)  
Mailing Address 425 2nd St SE

City Cedar Rapids State IA Zip Code 52401-1819

Purpose of Disbursement  
Payroll taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
04 / 30 / 2013

Amount of Each Disbursement this Period  
594.50

Transaction ID : VN7G19HEYS1

Category/Type  
001

**c. Internal Revenue Service**

Full Name (Last, First, Middle Initial)  
Mailing Address 425 2nd St SE

City Cedar Rapids State IA Zip Code 52401-1819

Purpose of Disbursement  
Payroll taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
05 / 15 / 2013

Amount of Each Disbursement this Period  
594.50

Transaction ID : VN7G19HZ327

Category/Type  
001

**SUBTOTAL** of Disbursements This Page (optional)..... 1383.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 17 / 2013</b>
Mailing Address <b>425 2nd St SE</b>		Amount of Each Disbursement this Period <b>594.50</b>
City <b>Cedar Rapids</b> State <b>IA</b> Zip Code <b>52401-1819</b>	Purpose of Disbursement <b>Payroll taxes</b> <b>001</b> Category/Type	
Candidate Name		<b>Transaction ID : VN7G19J6788</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. IOWA DEMOCRATIC PARTY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 08 / 2013</b>
Mailing Address <b>5661 FLEUR DRIVE</b>		Amount of Each Disbursement this Period <b>1000.00</b>
City <b>DES MOINES</b> State <b>IA</b> Zip Code <b>50321</b>	Purpose of Disbursement <b>Voter file</b> <b>001</b> Category/Type	
Candidate Name <b>IOWA DEMOCRATIC PARTY</b>		<b>Transaction ID : VN7G19H92E4</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. IOWA DEMOCRATIC PARTY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 14 / 2013</b>
Mailing Address <b>5661 FLEUR DRIVE</b>		Amount of Each Disbursement this Period <b>1000.00</b>
City <b>DES MOINES</b> State <b>IA</b> Zip Code <b>50321</b>	Purpose of Disbursement <b>Voter file</b> <b>001</b> Category/Type	
Candidate Name <b>IOWA DEMOCRATIC PARTY</b>		<b>Transaction ID : VN7G19HYN59</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2594.50</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 60			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

Full Name (Last, First, Middle Initial) <b>A. IOWA DEMOCRATIC PARTY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 11 / 2013</b>
Mailing Address <b>5661 FLEUR DRIVE</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : VN7G19J4CJ8</b>
City <b>DES MOINES</b> State <b>IA</b> Zip Code <b>50321</b>	Purpose of Disbursement <b>Voter file</b> Category/Type <b>001</b>	
Candidate Name <b>IOWA DEMOCRATIC PARTY</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. Iowa Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 01 / 2013</b>
Mailing Address <b>1305 E Walnut St</b>		Amount of Each Disbursement this Period <b>104.00</b> <b>Transaction ID : VN7G19HEYT9</b>
City <b>Des Moines</b> State <b>IA</b> Zip Code <b>50319-0106</b>	Purpose of Disbursement <b>Payroll taxes</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>C. Iowa Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 16 / 2013</b>
Mailing Address <b>1305 E Walnut St</b>		Amount of Each Disbursement this Period <b>104.00</b> <b>Transaction ID : VN7G19HZ335</b>
City <b>Des Moines</b> State <b>IA</b> Zip Code <b>50319-0106</b>	Purpose of Disbursement <b>Payroll taxes</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1208.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

Full Name (Last, First, Middle Initial) <b>A. Larry Murphy</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2013
Mailing Address 531 6th St NW		Amount of Each Disbursement this Period 125.00 <b>Transaction ID : VN8F99Q0DX8I</b>
City Oelwein State IA Zip Code 50662-1153	Purpose of Disbursement Office space Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	* In-Kind Received

Full Name (Last, First, Middle Initial) <b>B. Larry Murphy</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2013
Mailing Address 531 6th St NW		Amount of Each Disbursement this Period 125.00 <b>Transaction ID : VN8F99Q0E19I</b>
City Oelwein State IA Zip Code 50662-1153	Purpose of Disbursement Office space Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	* In-Kind Received

Full Name (Last, First, Middle Initial) <b>C. PCMS,LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2013
Mailing Address 1050 17th St NW		Amount of Each Disbursement this Period 472.50 <b>Transaction ID : VN7G19HWEA9</b>
City Washington State DC Zip Code 20036-5503	Purpose of Disbursement Accounting services Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	722.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

Full Name (Last, First, Middle Initial) <b>A. PCMS,LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 22 / 2013</b>
Mailing Address <b>1050 17th St NW</b>		Amount of Each Disbursement this Period <b>630.00</b> <b>Transaction ID : VN7G19J6WG5</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20036-5503</b>	Purpose of Disbursement <b>Accounting services</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 05 / 2013</b>
Mailing Address <b>190 John F Kennedy Rd</b>		Amount of Each Disbursement this Period <b>251.92</b> <b>Transaction ID : VN7G19J3Z01</b>
City <b>Dubuque</b> State <b>IA</b> Zip Code <b>52002-5300</b>	Purpose of Disbursement <b>Office supplies</b> Category/Type <b>006</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>C. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 10 / 2013</b>
Mailing Address <b>350 W 6th St</b>		Amount of Each Disbursement this Period <b>184.00</b> <b>Transaction ID : VN7G19HXGF1</b>
City <b>Dubuque</b> State <b>IA</b> Zip Code <b>52001-4669</b>	Purpose of Disbursement <b>Postage</b> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1065.92</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Murphy for Iowa**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 06 / 2013</b>
Mailing Address <b>350 W 6th St</b>		Amount of Each Disbursement this Period <b>322.00</b>
City <b>Dubuque</b> State <b>IA</b> Zip Code <b>52001-4669</b>	Purpose of Disbursement <b>Postage</b> <input type="checkbox"/> <b>001</b> Category/Type	
Candidate Name		<b>Transaction ID : VN7G19J3Z34</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement 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:		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>322.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>17603.51</b>