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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

| FORM 3 | For An A | BURSEI uthorized Com | | | | Office Use Only |
|---|---------------------|-----------------------|--|------------------|----------------------------|---------------------------------|
| NAME OF COMMITTEE (in full) | TYPE OR PRINT | • | ample: If typinger the lines. | g, type | 12FE4M5 | Silino dec Giny |
| IOWANS FOR LATH | AM | | | | | |
| I | | | | | | |
| ADDRESS (number and street) | 499 South Cap | itol Street, SW | | | | |
| ▼ | Suite 507 | | | | | |
| Check if different than previously reported. (ACC) | Washington | | | | DC 2 | 0003 |
| 2. FEC IDENTIFICATION | NUMBER ▼ | CITY | | | STATE A | ZIP CODE |
| C C00287045 | | 3. IS THIS REPORT | × NEW (N) | OR | AMENDE (A) | STATE ▼ DISTRICT |
| 4. TYPE OF REPORT ((a) Quarterly Reports: April 15 Quarterly | y Report (Q1) | (b) 12-Day PRE | -Election Repo Primary (12P) Convention (1 | | General (12 Special (12 | |
| July 15 Quarterly Cottober 15 Quarterly | terly Report (Q3) | Election on | M M / | D D / | Y Y Y Y | in the State of |
| January 31 Year- | End Report (YE) | (c) 30-Day POS | T -Election Rep | ort for the: | | |
| | | | General (30G | | Runoff (30F | Special (30S) |
| Termination Repo | ort (TER) | Election on | M M / | D D / | Y Y Y Y | in the State of |
| 5. Covering Period | 07 / D D / | Y Y Y Y Y 2015 | through | M M | / 0 0 / | Y Y Y Y Y 2015 |
| I certify that I have examined | this Report and to | the best of my kr | nowledge and b | pelief it is tru | ue, correct and | complete. |
| Type or Print Name of Treasu | rer Timothy Paul | Hecht | | | | |
| Signature of Treasurer T | imothy Paul Hecht | | [Electronically F | <u>"iled]</u> D | ate 10 | 14 / Y Y Y Y Y Y Y 2015 |
| NOTE: Submission of false, erro | oneous, or incomple | te information may | subject the per | son signing t | his Report to the | e penalties of 2 U.S.C. §437g. |
| Office Use Only | | | | | | FEC FORM 3 (Revised 02/2003) |

SUMMARY PAGE

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

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Write or Type Committee Name

IOWANS FOR LATHAM

| R | eport | t Covering the Period: From: | 07 | M 09 / 30 / Y 2015 |
|-----|-------|--|-------------------------|---------------------------------|
| | | | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
| 6. | Net | Contributions (other than loans) | | |
| | (a) | Total Contributions (other than loans) (from Line 11(e)) | 0.00 | 1109407.46 |
| | (b) | Total Contribution Refunds (from Line 20(d)) | 0.00 | 132363.67 |
| | (c) | Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) | 0.00 | 977043.79 |
| 7. | Net | Operating Expenditures | | |
| | (a) | Total Operating Expenditures (from Line 17) | 390.83 | 534566.36 |
| | (b) | Total Offsets to Operating Expenditures (from Line 14) | 0.00 | 71322.50 |
| | (c) | Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) | 390.83 | 463243.86 |
| 8. | | sh on Hand at Close of porting Period (from Line 27) | 427608.71 | |
| 9. | the | ots and Obligations Owed TO Committee (Itemize all on medule C and/or Schedule D) | 0.00 | |
| 10. | the | ots and Obligations Owed BY Committee (Itemize all on a sedule 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)

PAGE 3 / 7

Write or Type Committee Name

IOWANS FOR LATHAM

| I. RECEIPTS | | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date | |
|-------------|--|-------------------------------|---------------------------------|--|
| 11. | CONTRIBUTIONS (other than loans) FROM: | | | |
| | (a) Individuals/Persons Other Than | | | |
| | Political Committees (i) Itemized (use Schedule A) | 0.00 | 250789.20 | |
| | (ii) Unitemized | 0.00 | 43233.79 | |
| | (iii) TOTAL of contributions from individuals | 0.00 | 294022.99 | |
| | (b) Political Party Committees(c) Other Political Committees | 0.00 | 100.00 | |
| | (c) Other Political Committees (such as PACs) | 0.00 | 815284.47 | |
| | (d) The Candidate | 0.00 | 0.00 | |
| | (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)) | 0.00 | 1109407.46 | |
| 2. | TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 20893.93 | |
| 13. | LOANS: | | | |
| | (a) Made or Guaranteed by the Candidate | 0.00 | 0.00 | |
| | (b) All Other Loans | 0.00 | 0.00 | |
| | (c) TOTAL LOANS (add Lines 13(a) and (b)) | 0.00 | 0.00 | |
| 4. | OFFSETS TO OPERATING | | | |
| | EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 71322.50 | |
| 5. | OTHER RECEIPTS (Dividends, Interest, etc.) | 0.00 | 1178.25 | |
| 6. | TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) | 0.00 | 1202802.14 | |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 7

| II. DISBURSEMENTS | | II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date | |
|--|-----|--|-------------------------------|------------------------------------|--|
| 17. | OP | ERATING EXPENDITURES | 390.83 | 534566.36 | |
| 18. | | ANSFERS TO OTHER THORIZED COMMITTEES | 0.00 | 0.00 | |
| 19. | LO | AN 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. | REI | FUNDS OF CONTRIBUTIONS TO: | | | |
| | (a) | Individuals/Persons Other Than Political Committees | 0.00 | 40139.20 | |
| | | | 0.00 | 0.00 | |
| | (b) | Political Party Committees Other Political Committees | | 0.00 | |
| | | (such as PACs) | 0.00 | 92224.47 | |
| | (d) | TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)) | 0.00 | 132363.67 | |
| 21. | ОТІ | HER DISBURSEMENTS | 2000.00 | 230000.00 | |
| 22. | | TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21) | 2390.83 | 896930.03 | |
| | | III. CASH SUN | MMARY | | |
| 23. | CAS | SH ON HAND AT BEGINNING OF REPORT | TING PERIOD | 429999.54 | |
| 24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3) | | | 0.00 | | |
| 25. | SUI | BTOTAL (add Line 23 and Line 24) | | 429999.54 | |
| 26. | TO | TAL DISBURSEMENTS THIS PERIOD (from | Line 22) | 2390.83 | |
| | CAS | SH ON HAND AT CLOSE OF REPORTING | PERIOD | | |

SCHEDULE B (FEC Form 3)

PAGE 5 7 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) **IOWANS FOR LATHAM** Full Name (Last, First, Middle Initial) Date of Disbursement FIRST NATIONAL BANK OMAHA 2015 Mailing Address PO BOX 2818 08 20 City State Zip Code Amount of Each Disbursement this Period NE **OMAHA** 58103 Purpose of Disbursement 35.00 annual membership fee Transaction ID: SB17.5008 Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) VERIZON WIRELESS Date of Disbursement Mailing Address 777 BIG TIMBER ROAD 07 06 2015 City State Zip Code Amount of Each Disbursement this Period IL **ELGIN** 60123 118.61 Purpose of Disbursement mobile phone expense Transaction ID: SB17.5006 Candidate Name Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) C. VERIZON WIRELESS Date of Disbursement Mailing Address 777 BIG TIMBER ROAD 08 04 2015 City State Zip Code Amount of Each Disbursement this Period **ELGIN** IL 60123 Purpose of Disbursement 118.61 mobile phone expense Transaction ID : SB17.5007 Candidate Name Category/ Type Office Sought: Disbursement For: House

State: District: 272.22 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

General

Primary

Other (specify)

Senate

President

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

PAGE 6 7 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

IOWANS FOR LATHAM

Full Name (Last, First, Middle Initial)

A. VERIZON WIRELESS

Date of Disbursement

| | | First, Middle Initial) | | | | |
|----|--|--------------------------------|--|-------------------|---|--|
| A. | VERIZON V | VIRELESS | | | Date of Disbursement | |
| | Mailing Address 777 BIG TIMBER ROAD | | | | 09 / 04 / 2015 | |
| | City | State | e Zip Code | | Amount of Each Disbursement this Period | |
| | ELGIN | IL | 60123 | | | |
| | Purpose of Disbu mobile phone exp | rsement pense | | | 118.61 Transaction ID : SB17.5009 | |
| | Candidate Name | | | Category/ Type | | |
| | Office Sought: | President Oth | t For: nary General er (specify) | | | |
| | State: | District: | | | | |
| В. | Full Name (Last, First, Middle Initial) 3. | | | | Date of Disbursement | |
| | Mailing Address | | | | | |
| | City | State | e Zip Code | | Amount of Each Disbursement this Period | |
| | Purpose of Disbursement | | | | | |
| | Candidate Name | | | Category/ Type | | |
| | Office Sought: | President Oth | t For: mary General er (specify) | | | |
| | State: | District: | | | | |
| | Full Name (Last, | First, Middle Initial) | | | Date of Disbursement | |
| C. | | | | | | |
| | City State Zip Code Purpose of Disbursement Candidate Name Category/ Type | | | | M M / D D / Y Y Y Y | |
| | | | | | Amount of Each Disbursement this Period | |
| | | | | | | |
| | | | | | | |
| | Office Sought: State: | | t For: nary General er (specify) | | | |
| Г | | | | | | |
| s | SUBTOTAL of Dish | ursements This Page (optional) | | | 118.61 | |
| | | | | | 390.83 | |
| ΙT | TOTAL This Period (last page this line number only) | | | | | |

| 30 | HEDULE B (FEC Form 3) | | | FOR LINE NUMBER: PAGE 7 OF 7 | | |
|-----------|---|-----------------------------------|-------------------|---|--|--|
| | • | Use separate schedule(s) | | (check only one) | | |
| TI | EMIZED DISBURSEMENTS | for each category Detailed Summar | | 17 18 19a 19b | | |
| | | | , | 20a 20b 20c X 21 | | |
| | y information copied from such Reports and Statements in for commercial purposes, other than using the name and | | | | | |
| \ | NAME OF COMMITTEE (In Full) | | | | | |
| \rangle | IOWANS FOR LATHAM | | | | | |
| | Full Name (Last, First, Middle Initial) | | | Data of Diskumanant | | |
| ۹. | AUSTIN SCOTT FOR CONGRESS INC | Date of Disbursement | | | | |
| | Mailing Address PO BOX 2530 | | | 07 08 2015 | | |
| | City State | Zip Code | | Amount of Each Disbursement this Period | | |
| | TIFTON GA | 31793 | | 4000.00 | | |
| | Purpose of Disbursement contribution | | | 1000.00 | | |
| | Candidate Name | | | Transaction ID : SB21.5010 | | |
| | Odnordate Name | | Category/ Type | | | |
| | Office Sought: House Disbursement Fo | or: 2016 | | | | |
| | Senate Priman | · | | | | |
| | | (specify) | | | | |
| | State: GA District: 08 Full Name (Last, First, Middle Initial) | | | | | |
| | SIMPSON FOR CONGRESS | | | Date of Disbursement | | |
| 3. | Sivil SOLLI SIL SOLLONESS | | | | | |
| | Mailing Address 1487 PARKWAY DRIVE | | | 07 | | |
| | City State | Zip Code | | Amount of Each Disbursement this Period | | |
| | BLACKFOOT ID | 83221 | | 1000.00 | | |
| | Purpose of Disbursement contribution | | | 1000.00 | | |
| | Condidate Name | | | Transaction ID : SB21.5012 | | |
| | Ourididate Name | | Category/ Type | | | |
| | Office Sought: X House Disbursement Fo | pr: 2016 | .,,,,, | _ | | |
| | Senate Primary | y General | | | | |
| | | (specify) | | | | |
| | State: ID District: 02 | | | | | |
| | Full Name (Last, First, Middle Initial) | | | Date of Disbursement | | |
| Э. | | | | | | |
| | Mailing Address | | | M M / D D / Y Y Y | | |
| | City State Z | | | | | |
| | Only State 2 | Zip Code | | Amount of Each Disbursement this Period | | |
| | Purpose of Disbursement | | | 7 | | |
| | Candidate Name | | | | | |
| | Candidate Name | | Category/ Type | | | |
| | Office Sought: House Disbursement Fo | .,,,, | \dashv | | | |
| | Senate Primary | y General | | | | |
| | President Other (| (specify) | | | | |
| | State: District: | | | | | |
| | | | | 2000.00 | | |
| S | UBTOTAL of Disbursements This Page (optional) | | | 2000.00 | | |
| | | | | 2000.00 | | |

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