

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
Republican Party of Iowa

ADDRESS (number and street) 621 E. Ninth Street
Check if different than previously reported. (ACC) Des Moines IA 50309

2. FEC IDENTIFICATION NUMBER C C00014498
3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report
(b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)
(c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)
(d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 03 / 01 / 2010 through 03 / 31 / 2010

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 John Kabitzke

Signature of Treasurer John Kabitzke [Electronically Filed] Date 08 / 30 / 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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Republican Party of Iowa

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2010"/>		235948.34
(b) Cash on Hand at Beginning of Reporting Period.....	183313.89	
(c) Total Receipts (from Line 19)	73713.15	208187.04
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	257027.04	444135.38
7. Total Disbursements (from Line 31).....	69281.03	256389.37
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	187746.01	187746.01
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	7723.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	57414.59	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Republican Party of Iowa

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	24725.00	61090.00
(ii) Unitemized	36804.10	94893.15
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	61529.10	155983.15
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	150.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	61529.10	156133.15
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	564.80	2644.23
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	11619.25	11811.25
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	37598.41
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	37598.41
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	73713.15	208187.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	73713.15	170588.63

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	3051.16	18568.19
(ii) Non-Federal Share.....	11478.09	69851.48
(b) Other Federal Operating Expenditures	54751.78	167919.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	69281.03	256339.37
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	50.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	50.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	69281.03	256389.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	57802.94	186537.89

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	61529.10	156133.15
34. Total Contribution Refunds (from Line 28(d))	0.00	50.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	61529.10	156083.15
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	57802.94	186487.89
37. Offsets to Operating Expenditures (from Line 15, page 3).....	564.80	2644.23
38. Net Operating Expenditures (subtract Line 37 from Line 36)	57238.14	183843.66

: 97 `A-G79 @05 B9CI G`H9LH`F9 @5 H98 `HC `5 `F9DCFH`ZG7 <98I @ `CF `H9A-N5 H-CB

Form/Schedule: F3XA
Transaction ID :

All expenditures listed on Schedule B for line 30b during this period are generic, and not made on behalf of any federal election or federal candidate/committee. During this reporting period, payroll, payroll taxes and fringe benefits for any committee employee who spent 25% or more of their time on activities related to a Federal election are being reported as Federal Election Activity and show on Schedule B for line 30b. All salaries, wages and/or fringe benefits reported on Schedule H4 are for employees who spent less than 25% of their time on federal election activity or in connection with a Federal election. The committee hereby incorporates by reference Form 99 Miscellaneous Report, June 20, 2009, outlining its policies with regard to payments received by candidate committees for goods and services provided. The Republican Party of Iowa owns and operates its own building and land at its headquarters in Des Moines, Iowa. This committee does not recognize registered lobbyists or registrant committees for purposes of aggregate contributions. The Republican Party of Iowa follows a best efforts policy/procedure that begins with a clean and conspicuous request from donors for their full name, mailing address, occupation, and name of employer at the initial solicitation for a contribution, informing the contributor of the requirements of federal law for the reporting of such information, as required by under 11 CFR 104.7. Upon receipt of a contribution, collected donor information, as reported by the donor, is captured into our contributor database for purposes of reporting on the next FEC disclosure report. All contributors who have crossed the \$200 cumulative threshold and have not provided sufficient information are sent correspondence requesting the missing information (that does not include a solicitation of contribution), including a postage-paid return envelope. This is completed on a twice monthly basis. If information is still missing at the time of a reporting cutoff, a phone contact is made. A record of the correspondence is documented and retained for verification. Every effort is made to never have missing information on each disclosure report before filing; however, when information is received following a filing, amendments of the original report or memo entries on subsequent reports are submitted.

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 53
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial) A. Keith Borglum		Date of Receipt
Mailing Address 1301 Pine St		<input type="text" value="03"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
City	State	Zip Code
Janesville	IA	50647-1028
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 00320.C346569
Name of Employer	Occupation	Amount of Each Receipt this Period
Kay Park Rec Corp	CEO	<input type="text" value="220.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Receipt
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. William Burke		Date of Receipt
Mailing Address PO Box 723 57113 250th St		<input type="text" value="03"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
City	State	Zip Code
Ames	IA	50010-0723
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 00320.C346582
Name of Employer	Occupation	Amount of Each Receipt this Period
n/a	Retired	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Receipt
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Robert Camblin		Date of Receipt
Mailing Address 903 Locust St		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
City	State	Zip Code
Atlantic	IA	50022-2019
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 00320.C347469
Name of Employer	Occupation	Amount of Each Receipt this Period
Camblin Mechanical, Inc.	President	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Receipt
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1220.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 8 OF 53
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

A. John Christensen
 Full Name (Last, First, Middle Initial)
 Mailing Address 2233 290th St
 City Blanchard State IA Zip Code 51630-4004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Farmer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 15 / 2010
Transaction ID : 00320.C347296
 Amount of Each Receipt this Period
 200.00
 Receipt

B. Ann Doyle
 Full Name (Last, First, Middle Initial)
 Mailing Address 2301 Muddy Creek Ln
 City Coralville State IA Zip Code 52241-3465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Weilman Savings Bank Occupation Investor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2010
Transaction ID : 00320.C346581
 Amount of Each Receipt this Period
 250.00
 Receipt

C. Ethel Ellingson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1307 Skyline Dr
 City Decorah State IA Zip Code 52101-2517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer n/a Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2010
Transaction ID : 00320.C347264
 Amount of Each Receipt this Period
 1000.00
 Receipt

SUBTOTAL of Receipts This Page (optional)..... ▶ 1450.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 53
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

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

Mailing Address 58 Red Bridge Dr

City State Zip Code
Sioux City IA 51104-1061

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

Name of Employer Occupation
W. A. Klinger, Inc. Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 08 / 2010
Transaction ID : 00320.C346998

Amount of Each Receipt this Period
5000.00

Receipt

Full Name (Last, First, Middle Initial)
B. Audrene Hansen

Mailing Address 6001 Creston Ave Unit 4

City State Zip Code
Des Moines IA 50321-1222

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

Name of Employer Occupation
n/a Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2010
Transaction ID : 00320.C346477

Amount of Each Receipt this Period
365.00

Receipt

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

Mailing Address 3314 John Lynde Rd

City State Zip Code
Des Moines IA 50312-3068

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

Name of Employer Occupation
Redwave Communications Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 29 / 2010
Transaction ID : 00420.C347899

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)..... ▶ 6365.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

A. Jeff Lamberti
Full Name (Last, First, Middle Initial)

Mailing Address 2621 NW 17th St

City Ankeny State IA Zip Code 50023-1087

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

Name of Employer Self Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 / 29 / 2010
Transaction ID : 00420.C347898

Amount of Each Receipt this Period
1000.00

Receipt

B. James Luhrs
Full Name (Last, First, Middle Initial)

Mailing Address 3826 Park Ave

City Des Moines State IA Zip Code 50321

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 22 / 2010
Transaction ID : 00420.C347572

Amount of Each Receipt this Period
500.00

Receipt

C. Harriet Macomber
Full Name (Last, First, Middle Initial)

Mailing Address 630 41st St

City Des Moines State IA Zip Code 50312-2705

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 02 / 2010
Transaction ID : C346454

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)
A. Lannie Miller

Mailing Address PO Box 462
301 1st Avenue SW

City West Bend State IA Zip Code 50597-0462

FEC ID number of contributing federal political committee.

Name of Employer I.B.P. Inc. Occupation Stock Buyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : 00320.C346778

Amount of Each Receipt this Period

Receipt

Full Name (Last, First, Middle Initial)
B. Augusta Petrone

Mailing Address 1608 W Main St

City Marshalltown State IA Zip Code 50158-5354

FEC ID number of contributing federal political committee.

Name of Employer n/a Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : C346455

Amount of Each Receipt this Period

Receipt

Full Name (Last, First, Middle Initial)
C. John Ruan III

Mailing Address 465 Foster Dr

City Des Moines State IA Zip Code 50312-2513

FEC ID number of contributing federal political committee.

Name of Employer Ruan Center Corp. Occupation Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : 00320.C347513

Amount of Each Receipt this Period

Receipt

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="5700.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial) A. Marcelyn Smid		Date of Receipt
Mailing Address PO Box 405 310 E Minnesota Ave # 405		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
City George	State IA	Zip Code 51237
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 00320.C347249
Name of Employer n/a	Occupation Retired	Amount of Each Receipt this Period <input type="text" value="200.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="275.00"/>	Receipt

Full Name (Last, First, Middle Initial) B. Marvin Walter		Date of Receipt
Mailing Address 2860 Greensboro Cir		<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
City Ames	State IA	Zip Code 50010-8917
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 00320.C346827
Name of Employer n/a	Occupation Self	Amount of Each Receipt this Period <input type="text" value="365.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="365.00"/>	Receipt

Full Name (Last, First, Middle Initial) C. John DeVries		Date of Receipt
Mailing Address 5700 University Ave Ste 210		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
City West Des Moines	State IA	Zip Code 50266-8278
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 00420.C347883
Name of Employer Colorfx, Inc.	Occupation CEO	Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	Receipt

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="3065.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

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

Mailing Address 102 Forest Rd

City Davenport State IA Zip Code 52803-3611

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

Name of Employer Eye Surgeons Assoc. PC Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 29 / 2010
Transaction ID : 00420.C347885

Amount of Each Receipt this Period
250.00

Receipt

B. Judy Mulkey
Full Name (Last, First, Middle Initial)

Mailing Address 425 N Illinois Ave

City Mason City State IA Zip Code 50401

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

Name of Employer Mason City Clinic Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
03 / 30 / 2010
Transaction ID : 00420.C347946

Amount of Each Receipt this Period
220.00

Receipt

C. James Stein
Full Name (Last, First, Middle Initial)

Mailing Address 2975 Highway 22

City Muscatine State IA Zip Code 52761-9413

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

Name of Employer JP Stein Occupation Veterinarian

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 / 22 / 2010
Transaction ID : 00420.C347587

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)..... ▶ 1470.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

A. Janet Toben
Full Name (Last, First, Middle Initial)

Mailing Address 180 Eastar Ct

City Ida Grove State IA Zip Code 51445-8160

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

Name of Employer n/a Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2010
Transaction ID : 00320.C346607

Amount of Each Receipt this Period
 240.00

Receipt

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

Mailing Address 510 1st Ave NW

City Rockford State IA Zip Code 50468-1108

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

Name of Employer n/a Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2010
Transaction ID : 00320.C346563

Amount of Each Receipt this Period
 220.00

Receipt

C. Maryanne Hamilton
Full Name (Last, First, Middle Initial)

Mailing Address 4003 Kathleen Way

City Davenport State IA Zip Code 52807

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

Name of Employer Hamilton Technical Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 10 / 2010
Transaction ID : 00320.C347174

Amount of Each Receipt this Period
 220.00

Receipt

SUBTOTAL of Receipts This Page (optional)..... ▶ 680.00

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

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

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

FOR LINE NUMBER: PAGE 15 OF 53
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)
A. Russ Strabala
 Mailing Address 23844 Cedar Jones Road
 City State Zip Code
 Lisbon IA 52253-9026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Cedar Rapids Millwork Supervisor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2010
Transaction ID : 00420.C347833
 Amount of Each Receipt this Period
 100.00
 Receipt

Full Name (Last, First, Middle Initial)
B. Harlan Perry
 Mailing Address 114 N Main Street
 City State Zip Code
 Maquoketa IA 52060-2201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Information Requested Information Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 10 / 2010
Transaction ID : 00320.C347101
 Amount of Each Receipt this Period
 200.00
 Receipt

Full Name (Last, First, Middle Initial)
C. John Bloom
 Mailing Address 4820 Elm St
 City State Zip Code
 West Des Moines IA 50265-2995
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2010
Transaction ID : 00420.C347699
 Amount of Each Receipt this Period
 35.00
 Receipt

SUBTOTAL of Receipts This Page (optional)..... ▶ 335.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

A. Carol Paustian
Full Name (Last, First, Middle Initial)
Mailing Address 389 W Parkview Dr
City Walcott State IA Zip Code 52773-7781
FEC ID number of contributing federal political committee. **C**
Name of Employer Black Hawk Spec Education Occupation Administrator
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **200.00**

Date of Receipt **03 / 22 / 2010**
Transaction ID : 00420.C347624
Amount of Each Receipt this Period **200.00**
Receipt

B. Corinne Barber
Full Name (Last, First, Middle Initial)
Mailing Address 1 Oaknoll Ct Unit 458
City Iowa City State IA Zip Code 52246-5250
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Retired
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 03 / 2010**
Transaction ID : 00320.C346580
Amount of Each Receipt this Period **500.00**
Receipt

C. Marie Loth
Full Name (Last, First, Middle Initial)
Mailing Address 4720 Bever Ave SE
City Cedar Rapids State IA Zip Code 52403-3207
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation Homemaker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **540.00**

Date of Receipt **03 / 23 / 2010**
Transaction ID : 00420.C347668
Amount of Each Receipt this Period **540.00**
Receipt

SUBTOTAL of Receipts This Page (optional)..... **1240.00**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 17 OF 53
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)
A. Vince Davis

Mailing Address PO Box 394

City State Zip Code
Early IA 50535-0394

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

Name of Employer Occupation
Iowa Farm Bureau Federation Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
03 / 22 / 2010
Transaction ID : 00420.C347693

Amount of Each Receipt this Period
200.00

Receipt

Full Name (Last, First, Middle Initial)
B. Peter Demarco

Mailing Address 8601 W Dodge Rd Ste 234

City State Zip Code
Omaha NE 68114-3497

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

Name of Employer Occupation
Ear, Nose and Throat Associate Otolaryngology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2010
Transaction ID : 00420.C347777

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	24725.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 53
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)
A. US Postmaster

Mailing Address 1165 2nd ave

City Des Moines State IA Zip Code 50318-9704

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.23

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2010
Transaction ID : 00420.C347745

Amount of Each Receipt this Period
320.80

Offsets to Operating Expenditu

NOTE: Postage Refund

Full Name (Last, First, Middle Initial)
B. Polk County GOP (#9156)

Mailing Address 621 E 9th St

City Des Moines State IA Zip Code 50309-5505

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 11 / 2010
Transaction ID : 00320.C347206

Amount of Each Receipt this Period
200.00

Offsets to Operating Expenditu

NOTE: March Rent

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	520.80
TOTAL This Period (last page this line number only).....▶	520.80

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

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

FOR LINE NUMBER: PAGE 19 OF 53
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)
A. Treasurer, State Of Iowa
 Mailing Address Hoover Office Building
 City Des Moines State IA Zip Code 50319-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 11400.75

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 04 / 2010
Transaction ID : 00320.C346651
 Amount of Each Receipt this Period
 11208.75
 Other Receipt
 NOTE: February Checkoff

Full Name (Last, First, Middle Initial)
B. Treasurer, State Of Iowa
 Mailing Address Hoover Office Building
 City Des Moines State IA Zip Code 50319-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 11801.25

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 11 / 2010
Transaction ID : 00320.C347221
 Amount of Each Receipt this Period
 400.50
 Other Receipt
 NOTE: January Checkoff

Full Name (Last, First, Middle Initial)
C.
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	11609.25
TOTAL This Period (last page this line number only).....▶	11609.25

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. John Ortega

Mailing Address 2360 West Dale Court

City Bettendorf State IA Zip Code 52722-

Purpose of Disbursement
travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2010

Transaction ID : 00420.E41512

Amount of Each Disbursement this Period

338.18

TRAVEL

Full Name (Last, First, Middle Initial)

B. Big Ten Rentals

Mailing Address 1820 Boyrum St

City Iowa City State IA Zip Code 52240-4555

Purpose of Disbursement
equipment rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2010

Transaction ID : 00420.E41520

Amount of Each Disbursement this Period

1661.14

EQUIPMENT RENTAL

Full Name (Last, First, Middle Initial)

C. Aristotle International, Inc.

Mailing Address 205 Pennsylvania Ave., SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement
PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2010

Transaction ID : 00420.E41461

Amount of Each Disbursement this Period

122.70

PROCESSING FEE

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

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

2122.02

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. Sigler Companies

Mailing Address P. O. Box 887

City State Zip Code
Ames IA 50010-0887

Purpose of Disbursement
generic FR printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	1	0

Transaction ID : 00420.E41517

Amount of Each Disbursement this Period

4	4	6	.	2	6
---	---	---	---	---	---

GENERIC FR PRINTING

Full Name (Last, First, Middle Initial)

B. Heartland Marketing Group

Mailing Address P. O. Box 125 - 110 N. Main Street

City State Zip Code
Early IA 50535-

Purpose of Disbursement
generic fundraising fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	0

Transaction ID : 00420.E41528

Amount of Each Disbursement this Period

4	1	9	.	7	5	8
---	---	---	---	---	---	---

GENERIC FUNDRAISING FEE

Full Name (Last, First, Middle Initial)

C. James C. Anderson

Mailing Address 507 E Locust St

City State Zip Code
Des Moines IA 50309-1935

Purpose of Disbursement
REIMBURSEMENT: See Below

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	1	0

Transaction ID : 00420.E41482

Amount of Each Disbursement this Period

7	2	0	.	7	1
---	---	---	---	---	---

REIMBURSEMENT: SEE BELOW

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

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

5	3	6	.	4	5	5
---	---	---	---	---	---	---

--	--	--	--	--	--	--

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. James C. Anderson

Mailing Address 507 E Locust St

City Des Moines State IA Zip Code 50309-1935

Purpose of Disbursement
mileage/ cab fare/parking

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	5			2	0	1	0		

Transaction ID : 00420.E41532

Amount of Each Disbursement this Period

3	1	6	.	8	2
---	---	---	---	---	---

[MEMO ITEM]

MEMO: MILEAGE/ CAB FARE/PARKING

Full Name (Last, First, Middle Initial)

B. Holiday Inn-Downtown

Mailing Address 1050 6th Ave

City Des Moines State IA Zip Code 50314-2606

Purpose of Disbursement
lodging

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	5			2	0	1	0		

Transaction ID : 00420.E41533

Amount of Each Disbursement this Period

2	3	0	.	9	0
---	---	---	---	---	---

[MEMO ITEM]

MEMO: LODGING

Full Name (Last, First, Middle Initial)

C. Joan Scotter

Mailing Address 180 School St.

City Marion State IA Zip Code 52302-4084

Purpose of Disbursement
travel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	5			2	0	1	0		

Transaction ID : 00420.E41480

Amount of Each Disbursement this Period

1	0	4	.	3	4
---	---	---	---	---	---

TRAVEL

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

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

1	0	4	.	3	4
---	---	---	---	---	---

1	0	4	.	3	4
---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. Sigler Companies

Mailing Address P. O. Box 887

City State Zip Code
Ames IA 50010-0887

Purpose of Disbursement
generic design services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
03 / 05 / 2010

Transaction ID : 00420.E41472

Amount of Each Disbursement this Period

556.50

GENERIC DESIGN SERVICES

Full Name (Last, First, Middle Initial)

B. Kabel Business Services

Mailing Address 1454 30th Street Suite 202

City State Zip Code
West Des Moines IA 50266-

Purpose of Disbursement
payroll service

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
03 / 31 / 2010

Transaction ID : 00420.E41530

Amount of Each Disbursement this Period

449.18

PAYROLL SERVICE

Full Name (Last, First, Middle Initial)

C. Eric Johansen

Mailing Address 304 NW 8th Street

City State Zip Code
Grimes IA 50111-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
03 / 16 / 2010

Transaction ID : 00420.E41513

Amount of Each Disbursement this Period

513.94

REIMBURSEMENT: SEE BELOW

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

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

1519.62

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. Eric Johansen

Mailing Address 304 NW 8th Street

City Grimes State IA Zip Code 50111-

Purpose of Disbursement
mileage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2010

Transaction ID : 00420.E41534

Amount of Each Disbursement this Period

102.86

[MEMO ITEM]
MEMO: MILEAGE

Full Name (Last, First, Middle Initial)

B. US Postmaster

Mailing Address 1165 2nd ave

City Des Moines State IA Zip Code 50318-9704

Purpose of Disbursement
postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2010

Transaction ID : 00420.E41535

Amount of Each Disbursement this Period

411.08

[MEMO ITEM]
MEMO: POSTAGE

Full Name (Last, First, Middle Initial)

C. Gopal Krishna

Mailing Address 3901 Stonebridge Road

City West Des Moines State IA Zip Code 50265-

Purpose of Disbursement
travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2010

Transaction ID : 00420.E41483

Amount of Each Disbursement this Period

258.01

TRAVEL

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

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

258.01

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. Holiday Inn-Downtown

Mailing Address 1050 6th Ave

City Des Moines State IA Zip Code 50314-2606

Purpose of Disbursement
lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2010

Transaction ID : 00420.E41492

Amount of Each Disbursement this Period

99.68

LODGING

Full Name (Last, First, Middle Initial)

B. William Schickel

Mailing Address 1443 E State St

City Mason City State IA Zip Code 50401-4433

Purpose of Disbursement
travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2010

Transaction ID : 00420.E41521

Amount of Each Disbursement this Period

294.52

TRAVEL

Full Name (Last, First, Middle Initial)

C. Delta Dental Plan of Iowa

Mailing Address PO Box 857

City Ankeny State IA Zip Code 50021-0857

Purpose of Disbursement
group insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2010

Transaction ID : 00420.E41505

Amount of Each Disbursement this Period

246.65

GROUP INSURANCE

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

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

640.85

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. Aristotle International, Inc.

Mailing Address 205 Pennsylvania Ave., SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement
PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2010

Transaction ID : 00420.E41463

Amount of Each Disbursement this Period

196.65

PROCESSING FEE

Full Name (Last, First, Middle Initial)

B. GOP Lounge LLC

Mailing Address PO Box 93931

City Des Moines State IA Zip Code 50393-3931

Purpose of Disbursement
generic advertising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 09 / 2010

Transaction ID : 00420.E41498

Amount of Each Disbursement this Period

350.00

GENERIC ADVERTISING

Full Name (Last, First, Middle Initial)

C. Erin Rapp

Mailing Address 3008 44th St

City Des Moines State IA Zip Code 50310-3515

Purpose of Disbursement
travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2010

Transaction ID : 00420.E41469

Amount of Each Disbursement this Period

73.63

TRAVEL

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

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

620.28

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. Kabel Business Services

Mailing Address 1454 30th Street Suite 202

City State Zip Code
West Des Moines IA 50266-

Purpose of Disbursement
REIMBURSEMENT: See Below

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	05	/	2010

Transaction ID : 00420.E41467

Amount of Each Disbursement this Period

15425.91

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

B. Kabel Business Services

Mailing Address 1454 30th Street Suite 202

City State Zip Code
West Des Moines IA 50266-

Purpose of Disbursement
payroll fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	05	/	2010

Transaction ID : 00420.E41554

Amount of Each Disbursement this Period

45.65

[MEMO ITEM]
MEMO: PAYROLL FEES

Full Name (Last, First, Middle Initial)

C. James C. Anderson

Mailing Address 507 E Locust St

City State Zip Code
Des Moines IA 50309-1935

Purpose of Disbursement
salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	05	/	2010

Transaction ID : 00420.E41555

Amount of Each Disbursement this Period

2777.00

[MEMO ITEM]
MEMO: SALARY

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

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

15425.91

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. Danielle Hardon

Mailing Address 1303 Seymour St

City TAMA State IA Zip Code 52339-

Purpose of Disbursement salary

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2010

Transaction ID : 00420.E41556

Amount of Each Disbursement this Period

1372.34

[MEMO ITEM]
MEMO: SALARY

Full Name (Last, First, Middle Initial)

B. Eric Johansen

Mailing Address 304 NW 8th Street

City Grimes State IA Zip Code 50111-

Purpose of Disbursement salary

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2010

Transaction ID : 00420.E41557

Amount of Each Disbursement this Period

1621.80

[MEMO ITEM]
MEMO: SALARY

Full Name (Last, First, Middle Initial)

C. Megan Koontz

Mailing Address 111 10th St Unit 210

City Des Moines State IA Zip Code 50309-4222

Purpose of Disbursement salary

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2010

Transaction ID : 00420.E41558

Amount of Each Disbursement this Period

1311.25

[MEMO ITEM]
MEMO: SALARY

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. Chad Olsen

Mailing Address 300 S. 5th Street

City Guthrie Center State IA Zip Code 50115-1605

Purpose of Disbursement
salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	05	/	2010

Transaction ID : 00420.E41559

Amount of Each Disbursement this Period

988.39

[MEMO ITEM]
MEMO: SALARY

Full Name (Last, First, Middle Initial)

B. Erin Rapp

Mailing Address 3008 44th St

City Des Moines State IA Zip Code 50310-3515

Purpose of Disbursement
salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	05	/	2010

Transaction ID : 00420.E41560

Amount of Each Disbursement this Period

963.80

[MEMO ITEM]
MEMO: SALARY

Full Name (Last, First, Middle Initial)

C. Matthew Strawn

Mailing Address 702 SW Coventry Cir

City Ankeny State IA Zip Code 50023-9200

Purpose of Disbursement
salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	05	/	2010

Transaction ID : 00420.E41561

Amount of Each Disbursement this Period

1100.49

[MEMO ITEM]
MEMO: SALARY

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. United States Treasury

Mailing Address Internal Revenue Service Center

City Kansas City State MO Zip Code 64999-

Purpose of Disbursement
taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			05			2010			

Transaction ID : 00420.E41562

Amount of Each Disbursement this Period

3540.01

[MEMO ITEM]
MEMO: TAXES

Full Name (Last, First, Middle Initial)

B. United States Treasury

Mailing Address Internal Revenue Service Center

City Kansas City State MO Zip Code 64999-

Purpose of Disbursement
taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			05			2010			

Transaction ID : 00420.E41563

Amount of Each Disbursement this Period

45.05

[MEMO ITEM]
MEMO: TAXES

Full Name (Last, First, Middle Initial)

C. State of Iowa - Workforce Development

Mailing Address PO Box 9231

City Des Moines State IA Zip Code 50306-9231

Purpose of Disbursement
payroll taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			05			2010			

Transaction ID : 00420.E41564

Amount of Each Disbursement this Period

1031.13

[MEMO ITEM]
MEMO: PAYROLL TAXES

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. Treasurer, State Of Iowa

Mailing Address Hoover Office Building

City Des Moines State IA Zip Code 50319-

Purpose of Disbursement taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2010

Transaction ID : 00420.E41565

Amount of Each Disbursement this Period

629.00

[MEMO ITEM]
MEMO: TAXES

Full Name (Last, First, Middle Initial)

B. Reed Copywriting

Mailing Address 131 Glyn Tawel Drive

City Granville State OH Zip Code 43023-

Purpose of Disbursement copywriting services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 09 / 2010

Transaction ID : 00420.E41500

Amount of Each Disbursement this Period

400.00

COPYWRITING SERVICES

Full Name (Last, First, Middle Initial)

C. Matthew Strawn

Mailing Address 702 SW Coventry Cir

City Ankeny State IA Zip Code 50023-9200

Purpose of Disbursement travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2010

Transaction ID : 00420.E41481

Amount of Each Disbursement this Period

441.82

TRAVEL

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

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

841.82

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. United HealthCare Insurance Company

Mailing Address Dept. CH 10151

City Palatine State IL Zip Code 60055-0151

Purpose of Disbursement
group health insurance

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2010

Transaction ID : 00420.E41506

Amount of Each Disbursement this Period

1269.71

GROUP HEALTH INSURANCE

Full Name (Last, First, Middle Initial)

B. Kabel Business Services

Mailing Address 1454 30th Street Suite 202

City West Des Moines State IA Zip Code 50266-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2010

Transaction ID : 00420.E41514

Amount of Each Disbursement this Period

15895.51

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Treasurer, State Of Iowa

Mailing Address Hoover Office Building

City Des Moines State IA Zip Code 50319-

Purpose of Disbursement
taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2010

Transaction ID : 00420.E41566

Amount of Each Disbursement this Period

628.00

[MEMO ITEM]
MEMO: TAXES

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

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

17165.22

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. State of Iowa - Workforce Development

Mailing Address PO Box 9231

City Des Moines State IA Zip Code 50306-9231

Purpose of Disbursement
payroll taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2010

Transaction ID : 00420.E41567

Amount of Each Disbursement this Period

1532.40

[MEMO ITEM]
MEMO: PAYROLL TAXES

Full Name (Last, First, Middle Initial)

B. United States Treasury

Mailing Address Internal Revenue Service Center

City Kansas City State MO Zip Code 64999-

Purpose of Disbursement
taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2010

Transaction ID : 00420.E41568

Amount of Each Disbursement this Period

3564.45

[MEMO ITEM]
MEMO: TAXES

Full Name (Last, First, Middle Initial)

C. Matthew Strawn

Mailing Address 702 SW Coventry Cir

City Ankeny State IA Zip Code 50023-9200

Purpose of Disbursement
salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2010

Transaction ID : 00420.E41569

Amount of Each Disbursement this Period

1100.50

[MEMO ITEM]
MEMO: SALARY

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. Erin Rapp

Mailing Address 3008 44th St

City Des Moines State IA Zip Code 50310-3515

Purpose of Disbursement
salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	0

Transaction ID : 00420.E41570

Amount of Each Disbursement this Period

9	5	6	.	5	5
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[MEMO ITEM]
MEMO: SALARY

Full Name (Last, First, Middle Initial)

B. Chad Olsen

Mailing Address 300 S. 5th Street

City Guthrie Center State IA Zip Code 50115-1605

Purpose of Disbursement
salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	0

Transaction ID : 00420.E41571

Amount of Each Disbursement this Period

9	8	8	.	4	0
---	---	---	---	---	---

[MEMO ITEM]
MEMO: SALARY

Full Name (Last, First, Middle Initial)

C. Megan Koontz

Mailing Address 111 10th St Unit 210

City Des Moines State IA Zip Code 50309-4222

Purpose of Disbursement
salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	0

Transaction ID : 00420.E41572

Amount of Each Disbursement this Period

1	3	1	.	1	2	5
---	---	---	---	---	---	---

[MEMO ITEM]
MEMO: SALARY

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

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

0	0	0
---	---	---

0	0	0
---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. Eric Johansen

Mailing Address 304 NW 8th Street

City Grimes State IA Zip Code 50111-

Purpose of Disbursement
salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	0

Transaction ID : 00420.E41573

Amount of Each Disbursement this Period

1	6	2	1	.	7	9
---	---	---	---	---	---	---

[MEMO ITEM]
MEMO: SALARY

Full Name (Last, First, Middle Initial)

B. Danielle Hardon

Mailing Address 1303 Seymour St

City TAMA State IA Zip Code 52339-

Purpose of Disbursement
salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	0

Transaction ID : 00420.E41574

Amount of Each Disbursement this Period

1	3	7	2	.	3	3
---	---	---	---	---	---	---

[MEMO ITEM]
MEMO: SALARY

Full Name (Last, First, Middle Initial)

C. James C. Anderson

Mailing Address 507 E Locust St

City Des Moines State IA Zip Code 50309-1935

Purpose of Disbursement
salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	0

Transaction ID : 00420.E41575

Amount of Each Disbursement this Period

2	7	7	6	.	9	9
---	---	---	---	---	---	---

[MEMO ITEM]
MEMO: SALARY

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

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

0	0	0	0	.	0	0
---	---	---	---	---	---	---

0	0	0	0	.	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. Kabel Business Services

Mailing Address 1454 30th Street Suite 202

City West Des Moines State IA Zip Code 50266-

Purpose of Disbursement
payroll fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2010

Transaction ID : 00420.E41576

Amount of Each Disbursement this Period

42.85

[MEMO ITEM]
MEMO: PAYROLL FEE

Full Name (Last, First, Middle Initial)

B. Megan Koontz

Mailing Address 111 10th St Unit 210

City Des Moines State IA Zip Code 50309-4222

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2010

Transaction ID : 00420.E41478

Amount of Each Disbursement this Period

116.71

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Bankers Trust Company

Mailing Address 665 Locust Street PO Box 4914

City Des Moines State IA Zip Code 50306-4914

Purpose of Disbursement
bank fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2010

Transaction ID : 00420.E41474

Amount of Each Disbursement this Period

248.89

BANK FEES

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

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

365.60

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. Aristotle International, Inc.

Mailing Address 205 Pennsylvania Ave., SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement
PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 06 / 2010

Transaction ID : 00420.E41460

Amount of Each Disbursement this Period

306.73

PROCESSING FEE

Full Name (Last, First, Middle Initial)

B. Delta Dental Plan of Iowa

Mailing Address PO Box 857

City Ankeny State IA Zip Code 50021-0857

Purpose of Disbursement
group insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2010

Transaction ID : 00420.E41468

Amount of Each Disbursement this Period

126.64

GROUP INSURANCE

Full Name (Last, First, Middle Initial)

C. Lisa Smith

Mailing Address 224 Otlumwa St

City OTTUMWA State IA Zip Code 52501-

Purpose of Disbursement
travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2010

Transaction ID : 00420.E41527

Amount of Each Disbursement this Period

133.07

TRAVEL

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

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

566.44

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)
A. Rebecca Beach

Date of Disbursement
MM / DD / YYYY
03 / 30 / 2010

Mailing Address 4020 John Lynde Rd

City Des Moines State IA Zip Code 50312-3038

Purpose of Disbursement generic fundraising fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **00420.E41522**

Amount of Each Disbursement this Period
5150.00

Category/Type
GENERIC FUNDRAISING FEE

Full Name (Last, First, Middle Initial)
B. Stephen Scheffler

Date of Disbursement
MM / DD / YYYY
03 / 16 / 2010

Mailing Address 5112 Tamara Ln

City WEST DES MOINES State IA Zip Code 50265-

Purpose of Disbursement REIMBURSEMENT: SEE BELOW

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **00420.E41507**

Amount of Each Disbursement this Period
551.00

Category/Type
REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)
C. Stephen Scheffler

Date of Disbursement
MM / DD / YYYY
03 / 16 / 2010

Mailing Address 5112 Tamara Ln

City WEST DES MOINES State IA Zip Code 50265-

Purpose of Disbursement mileage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **00420.E41537**

Amount of Each Disbursement this Period
404.41

Category/Type
[MEMO ITEM]
MEMO: MILEAGE

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5701.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. Aristotle International, Inc.

Mailing Address 205 Pennsylvania Ave., SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement
PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2010

Transaction ID : 00420.E41462

Amount of Each Disbursement this Period

111.49

PROCESSING FEE

Full Name (Last, First, Middle Initial)

B. Kabel Business Services

Mailing Address 1454 30th Street Suite 202

City West Des Moines State IA Zip Code 50266-

Purpose of Disbursement
payroll services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2010

Transaction ID : 00420.E41496

Amount of Each Disbursement this Period

401.00

PAYROLL SERVICES

Full Name (Last, First, Middle Initial)

C. Eldon Pals

Mailing Address 611 E 3rd St S Apt 2

City Newton State IA Zip Code 50208-4752

Purpose of Disbursement
travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2010

Transaction ID : 00420.E41485

Amount of Each Disbursement this Period

101.01

TRAVEL

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

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

613.50

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)
A. Reid Houser

Mailing Address PO Box 462

City State Zip Code
Treynor IA 51575-

Purpose of Disbursement
travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
03 / 16 / 2010

Transaction ID : **00420.E41511**

Amount of Each Disbursement this Period
124.53

TRAVEL

Full Name (Last, First, Middle Initial)
B. Eldon Pals

Mailing Address 611 E 3rd St S Apt 2

City State Zip Code
Newton IA 50208-4752

Purpose of Disbursement
travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
03 / 05 / 2010

Transaction ID : **00420.E41488**

Amount of Each Disbursement this Period
140.60

TRAVEL

Full Name (Last, First, Middle Initial)
C. US Postmaster

Mailing Address 1165 2nd ave

City State Zip Code
Des Moines IA 50318-9704

Purpose of Disbursement
generic postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
03 / 05 / 2010

Transaction ID : **00420.E41477**

Amount of Each Disbursement this Period
500.00

GENERIC POSTAGE

SUBTOTAL of Disbursements This Page (optional)..... ▶ 765.13

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. Outreach Voice Broadcasting

Mailing Address 1873 S Bellaire St

City State Zip Code
Denver CO 80222-4358

Purpose of Disbursement
generic FR calls

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2010

Transaction ID : 00420.E41464

Amount of Each Disbursement this Period

1016.55

GENERIC FR CALLS

Full Name (Last, First, Middle Initial)

B. Kintera

Mailing Address 2000 Daniel Island Dr

City State Zip Code
Daniel Island SC 29492-7540

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2010

Transaction ID : 00420.E41459

Amount of Each Disbursement this Period

172.38

MERCHANT FEES

Full Name (Last, First, Middle Initial)

C. Bankers Trust Company

Mailing Address 665 Locust Street PO Box 4914

City State Zip Code
Des Moines IA 50306-4914

Purpose of Disbursement
bank fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 02 / 2010

Transaction ID : 00420.E41465

Amount of Each Disbursement this Period

211.53

BANK FEES

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

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

1400.46

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Iowa

Full Name (Last, First, Middle Initial)

A. Kabel Business Services

Mailing Address 1454 30th Street Suite 202

City West Des Moines State IA Zip Code 50266-

Purpose of Disbursement
payroll service

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2010

Transaction ID : 00420.E41515

Amount of Each Disbursement this Period

401.00

PAYROLL SERVICE

Full Name (Last, First, Middle Initial)

B. Bankers Trust Company

Mailing Address 665 Locust Street PO Box 4914

City Des Moines State IA Zip Code 50306-4914

Purpose of Disbursement
bank fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2010

Transaction ID : 00420.E41526

Amount of Each Disbursement this Period

275.55

BANK FEES

Full Name (Last, First, Middle Initial)

C. Montgomery Shaw

Mailing Address 4317 Panorama Drive

City Panora State IA Zip Code 50216-

Purpose of Disbursement
travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2010

Transaction ID : 00420.E41489

Amount of Each Disbursement this Period

271.78

TRAVEL

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

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

948.33

54423.08

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Republican Party of Iowa** Transaction ID : **LS10418.E45949**

LOAN SOURCE Full Name (Last, First, Middle Initial) McIntee for Congress	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address no mailing address available	
City Des Moines State IA ZIP Code 50309-	

Original Amount of Loan 4023.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 4023.00
------------------------------------	------------------------------------	--

TERMS

Date Incurred: M M / D D / Y Y Y Y Y Y

Date Due: M M / D D / Y Y Y Y Y Y

Interest Rate: % (apr)

Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....▶	<input type="text" value="4023.00"/>
TOTALS This Period (last page in this line only).....▶	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Republican Party of Iowa** Transaction ID : **LS041220038E7579**

LOAN SOURCE Full Name (Last, First, Middle Initial) Lockhard for Congress	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 12010	
City Des Moines State IA ZIP Code 50312-	

Original Amount of Loan 3700.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 3700.00
------------------------------------	------------------------------------	--

TERMS

Date Incurred: MM / DD / YYYY (01 / 01 / 1990) Date Due: MM / DD / YYYY (ON DEMAND) Interest Rate: 0.00 % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	3700.00
TOTALS This Period (last page in this line only).....▶	7723.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 45 OF 53
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Iowa

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect, LLC	Nature of Debt (Purpose): Telemarketing
Mailing Address 7300 Hudson Blvd., Suite 270	
City State Zip Code St. Paul MN 55128-	

Outstanding Balance Beginning This Period <input type="text" value="27657.15"/>	Transaction ID : LS30829.E54258	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="27657.15"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect, LLC	Nature of Debt (Purpose): Telemarketing
Mailing Address 7300 Hudson Blvd., Suite 270	
City State Zip Code St. Paul MN 55128-	

Outstanding Balance Beginning This Period <input type="text" value="22918.94"/>	Transaction ID : LS30829.E54262	
Amount Incurred This Period <input type="text" value="6838.50"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="29757.44"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="57414.59"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="57414.59"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="57414.59"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Form A: Sprint. Transaction ID: H400420.E41470. Allocated Activity or Event: Administrative (checked). Date: 03/05/2010. Year-to-Date: 77208.46. Summary: FEDERAL SHARE 99.52, NONFEDERAL SHARE 374.39, TOTAL AMOUNT 473.91.

Form B: Mt. Pleasant Park and Recreation. Transaction ID: H400420.E41471. Allocated Activity or Event: Administrative (checked). Date: 03/05/2010. Year-to-Date: 77334.84. Summary: FEDERAL SHARE 15.75, NONFEDERAL SHARE 59.25, TOTAL AMOUNT 75.00.

Form C: Contemporary Catering. Transaction ID: H400420.E41476. Allocated Activity or Event: Administrative (checked). Date: 03/05/2010. Year-to-Date: 75581.48. Summary: FEDERAL SHARE 78.53, NONFEDERAL SHARE 295.43, TOTAL AMOUNT 373.96.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 193.80, 729.07, 922.87.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [blank], [blank], [blank].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Iowa

A. Full Name (Last, First, Middle Initial) Transaction ID : H400420.E41479 Pitney Bowes Global Fin. Services, LLC Mailing Address PO Box 856460		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City State Zip Code Louisville KY 40285-6460	Purpose of Disbursement: equipment lease	Allocated Activity or Event Year-To-Date 76734.55
Activity or Event Identifier: ADMINISTRATION B 3	Category/Type	Date 03 / 05 / 2010
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 242.14 + 910.93 = 1153.07		

B. Full Name (Last, First, Middle Initial) Transaction ID : H400420.E41484 Waste Connections Inc. Mailing Address 3071 Dept. 1433		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City State Zip Code Los Angeles CA 90084-1433	Purpose of Disbursement: waste removal	Allocated Activity or Event Year-To-Date 74611.52
Activity or Event Identifier: ADMINISTRATION B 3	Category/Type	Date 03 / 05 / 2010
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 37.31 + 140.36 = 177.67		

C. Full Name (Last, First, Middle Initial) Transaction ID : H400420.E41486 Des Moines Water Works Mailing Address PO Box 9227		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City State Zip Code Des Moines IA 50306-9227	Purpose of Disbursement: water/sewer service	Allocated Activity or Event Year-To-Date 75207.52
Activity or Event Identifier: ADMINISTRATION B 3	Category/Type	Date 03 / 05 / 2010
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 7.99 + 30.07 = 38.06		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
287.44		1081.36		1368.80

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Iowa

A. Full Name (Last, First, Middle Initial) Qwest		Transaction ID : H400420.E41487		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P. O. Box 91104				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code Seattle WA 98111-9204				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: generic phone		Category/ Type		Allocated Activity or Event Year-To-Date 74433.85	
Activity or Event Identifier: ADMINISTRATION B 3				Date <input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
114.12		429.31		543.43	

B. Full Name (Last, First, Middle Initial) Danielle Hardon		Transaction ID : H400420.E41490		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1303 Seymour St				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code TAMA IA 52339-				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: REIMBURSEMENT: SEE BELOW		Category/ Type		Allocated Activity or Event Year-To-Date 77259.84	
Activity or Event Identifier: ADMINISTRATION B 3				Date <input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
10.79		40.59		51.38	

C. Full Name (Last, First, Middle Initial) Per Mar Security Services		Transaction ID : H400420.E41491		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO Box 1101				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code Davenport IA 52805-1101				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: building security services		Category/ Type		Allocated Activity or Event Year-To-Date 75169.46	
Activity or Event Identifier: ADMINISTRATION B 3				Date <input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
117.17		440.77		557.94	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
242.08		910.67		1152.75

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Iowa

A. Full Name (Last, First, Middle Initial) Transaction ID : H400420.E41497 Richman Yard Service / Snow Removal Mailing Address 691 38th Street		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City State Zip Code Des Moines IA 50312-	Category/ Type	Allocated Activity or Event Year-To-Date 78633.85
Purpose of Disbursement: grounds maintenance		Date <input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
Activity or Event Identifier: ADMINISTRATION B 3		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 126.00 + 474.00 = 600.00		

B. Full Name (Last, First, Middle Initial) Transaction ID : H400420.E41499 Xerox Corporation Mailing Address P. O. Box 802567		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City State Zip Code Chicago IL 60680-2567	Category/ Type	Allocated Activity or Event Year-To-Date 78033.85
Purpose of Disbursement: copier lease		Date <input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
Activity or Event Identifier: ADMINISTRATION B 3		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 144.58 + 543.88 = 688.46		

C. Full Name (Last, First, Middle Initial) Transaction ID : H400420.E41501 Capitol Coffee Mailing Address 5421 Westwood Circle		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City State Zip Code West Des Moines IA 50266-	Category/ Type	Allocated Activity or Event Year-To-Date 78725.83
Purpose of Disbursement: coffee service		Date <input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
Activity or Event Identifier: ADMINISTRATION B 3		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 19.32 + 72.66 = 91.98		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
289.90		1090.54		1380.44

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Iowa

A. Full Name (Last, First, Middle Initial) Culligan Water Conditioning		Transaction ID : H400420.E41502		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO Box 65065				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code West Des Moines IA 50265-0065				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: water		Category/Type		Allocated Activity or Event Year-To-Date 77345.39	
Activity or Event Identifier: ADMINISTRATION B 3				Date <input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
<input type="text" value="2.22"/>		<input type="text" value="8.33"/>		<input type="text" value="10.55"/>	

B. Full Name (Last, First, Middle Initial) Kari Putney		Transaction ID : H400420.E41503		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 303 NE 24th Ct				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code Ankeny IA 50021-9053				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: bookkeeping		Category/Type		Allocated Activity or Event Year-To-Date 80725.83	
Activity or Event Identifier: ADMINISTRATION B 3				Date <input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
<input type="text" value="420.00"/>		<input type="text" value="1580.00"/>		<input type="text" value="2000.00"/>	

C. Full Name (Last, First, Middle Initial) Kabel Business Services		Transaction ID : H400420.E41504		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1454 30th Street Suite 202				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code West Des Moines IA 50266-				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: payroll fee		Category/Type		Allocated Activity or Event Year-To-Date 80758.33	
Activity or Event Identifier: ADMINISTRATION B 3				Date <input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
<input type="text" value="6.83"/>		<input type="text" value="25.67"/>		<input type="text" value="32.50"/>	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="429.05"/>		<input type="text" value="1614.00"/>		<input type="text" value="2043.05"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Form A: Mid American Energy. Transaction ID: H400420.E41508. Allocated Activity or Event: Administrative. Date: 03/16/2010. Total Amount: 779.78.

Form B: Office Depot. Transaction ID: H400420.E41510. Allocated Activity or Event: Administrative. Date: 03/16/2010. Total Amount: 178.65.

Form C: Mediacom. Transaction ID: H400420.E41516. Allocated Activity or Event: Administrative. Date: 03/23/2010. Total Amount: 178.41.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 238.74, 898.10, 1136.84.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [blank], [blank], [blank].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Iowa

A. Full Name (Last, First, Middle Initial) Transaction ID : H400420.E41518 Capital Knowledge Consulting		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 7255		Allocated Activity or Event Year-To-Date 87566.76	
City State Zip Code Des Moines IA 50309-	Date <input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: compliance/accounting service	<input type="text"/>	Allocated Activity or Event Year-To-Date 87566.76	
Activity or Event Identifier: ADMINISTRATION B 3		Date <input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="1228.50"/>		<input type="text" value="4621.50"/>	
		<input type="text" value="5850.00"/>	

B. Full Name (Last, First, Middle Initial) Transaction ID : H400420.E41519 Des Moines Water Works		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 9227		Allocated Activity or Event Year-To-Date 88419.67	
City State Zip Code Des Moines IA 50306-9227	Date <input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: water/sewer service	<input type="text"/>	Allocated Activity or Event Year-To-Date 88419.67	
Activity or Event Identifier: ADMINISTRATION B 3		Date <input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="6.85"/>		<input type="text" value="25.75"/>	
		<input type="text" value="32.60"/>	

C. Full Name (Last, First, Middle Initial) Transaction ID : H400420.E41523 Qwest		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 91104		Allocated Activity or Event Year-To-Date 88387.07	
City State Zip Code Seattle WA 98111-9204	Date <input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: generic phone	<input type="text"/>	Allocated Activity or Event Year-To-Date 88387.07	
Activity or Event Identifier: ADMINISTRATION B 3		Date <input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="124.78"/>		<input type="text" value="469.42"/>	
		<input type="text" value="594.20"/>	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1360.13"/>		<input type="text" value="5116.67"/>		<input type="text" value="6476.80"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Form A: Capital Fire Equipment Company. Transaction ID: H400420.E41525. Allocated Activity: Administrative. Amounts: FEDERAL SHARE 10.02, NONFEDERAL SHARE 37.68, TOTAL AMOUNT 47.70.

Form B: Empty form for disbursement entry.

Form C: Empty form for disbursement entry.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (10.02), NONFEDERAL SHARE (37.68), TOTAL AMOUNT (47.70).

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE (3051.16), NONFEDERAL SHARE (11478.09), TOTAL AMOUNT (14529.25).