

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE

10 DEC 2010 4:42

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

Roxanne Conlin for Senate

ADDRESS (number and street)

PO Box 876

☐ Check if different than previously reported. (ACC)

Des Moines

IA

50304

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00470153

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

IA

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

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

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

11

02

2010

in the State of

IA

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

☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

11

02

2010

in the State of

IA

5. Covering Period

10

14

2010

through

11

22

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

Cyril Ann Mandelbaum

Signature of Treasurer

Cyril Ann Mandelbaum

Electronically Filed by Cyril Ann Mandelbaum

Date

11

30

2010

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

Office
Use
Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

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Write or Type Committee Name

Roxanne Conlin for Senate

Report Covering the Period:

From:

M M
1 0

D D
1 4

Y Y Y Y
2 0 1 0

To:

M M
1 1

D D
2 2

Y Y Y Y
2 0 1 0

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	79368.78	2098260.96
(b) Total Contribution Refunds (from Line 20(d)).....	50.00	9350.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	79318.78	2088910.96
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	443302.40	2960514.85
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	14080.06
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	443302.40	2946434.79
8. Cash on Hand at Close of Reporting Period (from Line 27).....	40817.97	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	500000.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

FE5AN018

10021012435

POST-ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 07/05)

Report of Receipts and Disbursements

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- . If the candidate participated in the general election, use this form for the 30-day Post-General report.
 . If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Roxanne Conlin for Senate

Report Covering the Period:

From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <table border="1"> <tr><td>M</td><td>M</td></tr> <tr><td>1</td><td>1</td></tr> </table> <table border="1"> <tr><td>D</td><td>D</td></tr> <tr><td>0</td><td>2</td></tr> </table> <table border="1"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table> (date of general election)	M	M	1	1	D	D	0	2	Y	Y	Y	Y	2	0	1	0	COLUMN C Total for <table border="1"> <tr><td>M</td><td>M</td></tr> <tr><td>1</td><td>1</td></tr> </table> <table border="1"> <tr><td>D</td><td>D</td></tr> <tr><td>0</td><td>3</td></tr> </table> <table border="1"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table> (date after general election) through <table border="1"> <tr><td>M</td><td>M</td></tr> <tr><td>1</td><td>1</td></tr> </table> <table border="1"> <tr><td>D</td><td>D</td></tr> <tr><td>2</td><td>2</td></tr> </table> <table border="1"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table> (last day of reporting period)	M	M	1	1	D	D	0	3	Y	Y	Y	Y	2	0	1	0	M	M	1	1	D	D	2	2	Y	Y	Y	Y	2	0	1	0
M	M																																																	
1	1																																																	
D	D																																																	
0	2																																																	
Y	Y	Y	Y																																															
2	0	1	0																																															
M	M																																																	
1	1																																																	
D	D																																																	
0	3																																																	
Y	Y	Y	Y																																															
2	0	1	0																																															
M	M																																																	
1	1																																																	
D	D																																																	
2	2																																																	
Y	Y	Y	Y																																															
2	0	1	0																																															
11. CONTRIBUTIONS (other than loans) FROM:																																																		
(a) Individuals/Persons Other than Political Committees																																																		
(i) Itemized (Use Schedule A)																																																		
44205.00	1687736.23	3500.00																																																
(ii) Unitemized																																																		
27186.24	337030.61	3044.27																																																
(iii) Total of contributions from individuals																																																		
71391.24	2024766.84	6544.27																																																
(b) Political Party Committees																																																		
1800.00	6500.00	300.00																																																
(c) Other Political Committees																																																		
0.00	2125.00	0.00																																																

**POST-ELECTION DETAILED
SUMMARY PAGE
Report of Receipts and Disbursements**

COLUMN A
Total this Period

COLUMN B
Election Cycle Total as of *
(date of general Election)
(* See page 5 for date)

COLUMN C
Total for * (date after general election)
Through * (last day of reporting period)
(* See page 5 for dates)

(d) The Candidate

6177.54

64869.12

2204.61

- (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))

79368.78

2098260.96

9048.88

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

28797.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate

0.00

1000000.00

0.00

(b). All Other Loans

0.00

0.00

0.00

(c). TOTAL LOANS (add Lines 13(a) and (b))

0.00

1000000.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)

0.00

14080.06

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc)

0.00

0.00

0.00

16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)

79368.78

3141138.02

9048.88

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

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Write or Type Committe Name

Roxanne Conlin for Senate

Report the covering period

From:

M M
1 0D D
1 4Y Y Y Y
2 0 1 0

To:

M M
1 1D D
2 2Y Y Y Y
2 0 1 0

II. DISBURSEMENTS

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
17. OPERATING EXPENDITURES		
443302.40	2960514.85	77089.08
18. TRANSFER TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN PAYMENTS		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
50.00	9350.00	50.00
(b) Political Party Committees		
0.00	0.00	0.00

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

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COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
-------------------------------	---	--

(c) Other political committees (such as PACs)

0.00

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c))

50.00

9350.00

50.00

21. OTHER DISBURSEMENTS

12100.00

62365.00

0.00

22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)

455452.40

3032229.85

77139.08

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

79318.78

2088910.96

8998.88

IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

443302.40

2946434.79

77089.08

V. CASH SUMMARY

23. CASH ON HAND AT BEGINING OF REPORTING PERIOD	416901.59
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....	79368.78
25. SUBTOTAL(add Line 23 and Line 24)	496270.37
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	455452.40
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	40817.97

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Michael F Agin</p> <p>Mailing Address 4890 Heatherstone Rd</p> <p>City State Zip Code Bettendorf IA 52722-5437</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 340.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 21 / 2010</p> <p>Transaction ID: C2247257</p> <p>Amount of Each Receipt this Period 40.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Kamesh Aiyer</p> <p>Mailing Address 11 Magazine Street Apt 2</p> <p>City State Zip Code Cambridge MA 02139</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Kashi Software Architects, Inc.</p> <p>Occupation Software Engineer</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 26 / 2010</p> <p>Transaction ID: C2249402</p> <p>Amount of Each Receipt this Period 500.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Jonathan Andry</p> <p>Mailing Address 610 Baronne St</p> <p>City State Zip Code New Orleans LA 70113-1004</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Self</p> <p>Occupation Attorney</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2000.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 02 / 2010</p> <p>Transaction ID: C2273487</p> <p>Amount of Each Receipt this Period 2000.00</p>
<p>SUBTOTAL of Receipts This Page (optional) 2540.00</p> <p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 8 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Robert Arbuckle Mailing Address 3812 Liberty Dr. Unit 1 City Iowa City State IA Zip Code 52240 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation General Contractor Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 325.00		Date of Receipt MM / DD / YYYY 10 / 27 / 2010 Transaction ID: C2264748 Amount of Each Receipt this Period 25.00
B. Full Name (Last, First, Middle Initial) Robert Arbuckle Mailing Address 3812 Liberty Dr. Unit 1 City Iowa City State IA Zip Code 52240 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation General Contractor Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 325.00		Date of Receipt MM / DD / YYYY 10 / 29 / 2010 Transaction ID: C2260057 Amount of Each Receipt this Period 25.00
C. Full Name (Last, First, Middle Initial) Elizabeth Ballantine Mailing Address 1113 Basil Rd City McLean State VA Zip Code 22101-1803 FEC ID number of contributing federal political committee. C Name of Employer EBA Associates Occupation President Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 11 / 03 / 2010 Transaction ID: C2272356 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)		300.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 175
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
 Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Richard Bartolomei</p> <p>Mailing Address 666 Grand Avenue Suite 1800</p> <p>City Des Moines State IA Zip Code 50309</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Bartolomei & Lange PLC</p> <p>Occupation Attorney</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 600.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y Y 1 0 / 2 9 / 2 0 1 0</p> <p>Transaction ID: C2259923</p> <p>Amount of Each Receipt this Period 100.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Dick Barton</p> <p>Mailing Address 233 N Sheldon Ave #6</p> <p>City Ames State IA Zip Code 50014</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 230.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y Y 1 0 / 2 6 / 2 0 1 0</p> <p>Transaction ID: C2249242</p> <p>Amount of Each Receipt this Period 25.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Dick Barton</p> <p>Mailing Address 233 N Sheldon Ave #6</p> <p>City Ames State IA Zip Code 50014</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 230.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y Y 1 1 / 0 1 / 2 0 1 0</p> <p>Transaction ID: C2262654</p> <p>Amount of Each Receipt this Period 25.00</p>
<p>SUBTOTAL of Receipts This Page (optional) ▶ 150.00</p>	
<p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 175
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Dick Barton</p> <p>Mailing Address 233 N Sheldon Ave #6</p> <p>City State Zip Code Ames IA 50014</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 230.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 01 / 2010</p> <p>Transaction ID: C2268248</p> <p>Amount of Each Receipt this Period 25.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Dick Barton</p> <p>Mailing Address 233 N Sheldon Ave #6</p> <p>City State Zip Code Ames IA 50014</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 230.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 01 / 2010</p> <p>Transaction ID: C2270402</p> <p>Amount of Each Receipt this Period 25.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) David B. Baum</p> <p>Mailing Address 1 Market Plz Ste 1030</p> <p>City State Zip Code San Francisco CA 94105-1101</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Baum & Blake</p> <p>Occupation Attorney</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 29 / 2010</p> <p>Transaction ID: C2256738</p> <p>Amount of Each Receipt this Period 1000.00</p>
<p>SUBTOTAL of Receipts This Page (optional) ► 1050.00</p> <p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 11 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Jodi Beavers Mailing Address 6124 Harwood Dr. City State Zip Code Des Moines IA 50312 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 11 / 03 / 2010 Transaction ID: C2271665 Amount of Each Receipt this Period 500.00
Name of Employer Metropolitan Properties Occupation Owner Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		
B. Full Name (Last, First, Middle Initial) Dale Berry Mailing Address 840 Austin Ave City State Zip Code Grants NM 87020-3307 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 10 / 21 / 2010 Transaction ID: C2248783 Amount of Each Receipt this Period 100.00
Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 400.00		
C. Full Name (Last, First, Middle Initial) Michael D. Block Mailing Address 19 W Jefferson St City State Zip Code Joliet IL 60432-4301 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 10 / 27 / 2010 Transaction ID: C2264756 Amount of Each Receipt this Period 100.00
Name of Employer Block, Block & Klukas, P.-C. Occupation Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 450.00		
SUBTOTAL of Receipts This Page (optional)		700.00
TOTAL This Period (last page this line number only)		

10021012444

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 175
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Barbara Boatwright</p> <p>Mailing Address 2331 E 39th Ct</p> <p>City State Zip Code Des Moines IA 50317-5609</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <input type="text" value="441.00"/></p>	<p>Date of Receipt MM / DD / YYYY 10 / 27 / 2010</p> <p>Transaction ID: C2261290</p> <p>Amount of Each Receipt this Period <input type="text" value="50.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Dorothy Bolin</p> <p>Mailing Address 3208 Pleasant Dr.</p> <p>City State Zip Code Cedar Falls IA 50613</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <input type="text" value="500.00"/></p>	<p>Date of Receipt MM / DD / YYYY 10 / 27 / 2010</p> <p>Transaction ID: C2264758</p> <p>Amount of Each Receipt this Period <input type="text" value="100.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Kathy Bonk</p> <p>Mailing Address 1200 New York Avenue, NW Suite 300</p> <p>City State Zip Code Washington DC 20005</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer CCMC Occupation Communications Executive</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <input type="text" value="1000.00"/></p>	<p>Date of Receipt MM / DD / YYYY 10 / 27 / 2010</p> <p>Transaction ID: C2250649</p> <p>Amount of Each Receipt this Period <input type="text" value="1000.00"/></p>
<p>SUBTOTAL of Receipts This Page (optional) <input type="text" value="1150.00"/></p>	
<p>TOTAL This Period (last page this line number only) <input type="text"/></p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Margaret Borgen</p> <p>Mailing Address 2504 Forest Dr</p> <p>City State Zip Code Des Moines IA 50312-5410</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Des Moines School Board</p> <p>Occupation Member</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 525.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 29 / 2010</p> <p>Transaction ID: C2260206</p> <p>Amount of Each Receipt this Period 25.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) David Bossart</p> <p>Mailing Address 1114 7th St. South</p> <p>City State Zip Code Fargo ND 58103</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self</p> <p>Occupation Attorney</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 25 / 2010</p> <p>Transaction ID: C2245496</p> <p>Amount of Each Receipt this Period 250.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paula Botstein</p> <p>Mailing Address 544 4th St</p> <p>City State Zip Code Brooklyn NY 11215-3009</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer FDA</p> <p>Occupation Physician</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 30 / 2010</p> <p>Transaction ID: C2271273</p> <p>Amount of Each Receipt this Period 1000.00</p>
<p>SUBTOTAL of Receipts This Page (optional) ► 1275.00</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

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

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

FOR LINE NUMBER:		PAGE 14 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) John A Bowman Mailing Address 18 Wildwood Trl City Bettendorf State IA Zip Code 52722-3871 FEC ID number of contributing federal political committee. C Name of Employer Bowman & DeFree Occupation Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 800.00		Date of Receipt 10 / 19 / 2010 Transaction ID: C2235765 Amount of Each Receipt this Period 250.00
B. Full Name (Last, First, Middle Initial) William J Bribresco Mailing Address 2114 Nicholas Ct City Bettendorf State IA Zip Code 52722-2177 FEC ID number of contributing federal political committee. C Name of Employer William J. Bribresco & Assoc. Occupation Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00		Date of Receipt 10 / 27 / 2010 Transaction ID: C2264655 Amount of Each Receipt this Period 500.00
C. Full Name (Last, First, Middle Initial) Charles Hughes Bruner Mailing Address 1148 Oklahoma Drive City Ames State IA Zip Code 50014 FEC ID number of contributing federal political committee. C Name of Employer Child and Family Policy Center Occupation Director Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1750.00		Date of Receipt 10 / 25 / 2010 Transaction ID: C2245423 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 15 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Nancy Burkhardt Mailing Address 862 340th St. City Bagley State IA Zip Code 50026 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 10 / 29 / 2010 Transaction ID: C2257039 Amount of Each Receipt this Period 100.00
Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00		
B. Full Name (Last, First, Middle Initial) Raymond A Callahan Mailing Address 1214 N 4th St City Ames State IA Zip Code 50010-5943 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 10 / 27 / 2010 Transaction ID: C2264763 Amount of Each Receipt this Period 100.00
Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 550.00		
C. Full Name (Last, First, Middle Initial) Judith H Campbell Mailing Address 19882 W Highway 149 City Hedrick State IA Zip Code 52563-8647 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 10 / 26 / 2010 Transaction ID: C2250439 Amount of Each Receipt this Period 1000.00
Name of Employer Self Occupation Crop Insurance Agent Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2250.00		
SUBTOTAL of Receipts This Page (optional)		1200.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 16 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) John P. Carlson Mailing Address PO Box 158 City State Zip Code Story City IA 50248-0158 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y 1 0 / 1 9 / 2 0 1 0 Transaction ID: C2235805 Amount of Each Receipt this Period 100.00
B. Full Name (Last, First, Middle Initial) Zach Carter Mailing Address 304 Second St P.O. Box 32 City State Zip Code Hills IA 52235-0032 FEC ID number of contributing federal political committee. C Name of Employer Student Occupation Student Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 225.00		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y 1 1 / 0 1 / 2 0 1 0 Transaction ID: C2266468 Amount of Each Receipt this Period 200.00
C. Full Name (Last, First, Middle Initial) Edward Cervantes Mailing Address 3475 Jersey Ridge Rd Ste 3 City State Zip Code Davenport IA 52807-2293 FEC ID number of contributing federal political committee. C Name of Employer Cervantes and Gordon Occupation Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 350.00		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y 1 1 / 0 2 / 2 0 1 0 Transaction ID: C2273518 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)		550.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Christine Milligan Ciha

Mailing Address 14787 Woodcrest Dr

City

Clive

State

IA

Zip Code

50325-7756

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

206.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2261431

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Marie E. Collins

Mailing Address 1001 Texas St
Ste 1250

City

Houston

State

TX

Zip Code

77002-3131

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Attorney

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

617.68

Date of Receipt

MM / DD / YYYY
10 / 19 / 2010

Transaction ID: C2234441

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Judith Conlin

Mailing Address 14155 Pinnacle Pointe Dr

City

Clive

State

IA

Zip Code

50325-8372

FEC ID number of contributing
federal political committee.

C

Name of Employer
Iowa Council for International Underst

Occupation

Director

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

385.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2261436

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Judith Conlin

Mailing Address 14155 Pinnacle Pointe Dr

City

Clive

State

IA

Zip Code

50325-8372

FEC ID number of contributing
federal political committee.

C

Name of Employer
Iowa Council for Internat-
ional Underst

Occupation

Director

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

385.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2261437

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Marianne Craft Norton

Mailing Address 2572 Village Rd

City

Decorah

State

IA

Zip Code

52101-7740

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Farmer

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2267753

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Hamilton Gravens

Mailing Address 2039 Indian Grass Court

City

Ames

State

IA

Zip Code

50014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Iowa State University

Occupation

Professor Emeritus

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.00

Date of Receipt

MM / DD / YYYY
10 / 19 / 2010

Transaction ID: C2235643

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 19 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Hamilton Cravens Mailing Address 2039 Indian Grass Court City Ames State IA Zip Code 50014 FEC ID number of contributing federal political committee. C Name of Employer Iowa State University Occupation Professor Emeritus Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 260.00		Date of Receipt MM / DD / YYYY 11 / 01 / 2010 Transaction ID: C2267815 Amount of Each Receipt this Period 50.00
B. Full Name (Last, First, Middle Initial) Hamilton Cravens Mailing Address 2039 Indian Grass Court City Ames State IA Zip Code 50014 FEC ID number of contributing federal political committee. C Name of Employer Iowa State University Occupation Professor Emeritus Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 260.00		Date of Receipt MM / DD / YYYY 11 / 01 / 2010 Transaction ID: C2270496 Amount of Each Receipt this Period 25.00
C. Full Name (Last, First, Middle Initial) Jen Hall De Kock Mailing Address 3415 Eastern Ave Apt 202 City Davenport State IA Zip Code 52807-2088 FEC ID number of contributing federal political committee. C Name of Employer Cartee Law Firm Occupation Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 850.00		Date of Receipt MM / DD / YYYY 10 / 25 / 2010 Transaction ID: C2247841 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)		325.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 20 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Robert Deltufo Mailing Address 13 Ober Rd. City State Zip Code Princeton NJ 08540-4917 FEC ID number of contributing federal political committee. C Name of Employer Skadden Arps Slate Meagher & Flom Occupation Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date Amount of Each Receipt this Period 500.00		Date of Receipt M M / D D / Y Y Y Y Y Y 1 1 / 0 3 / 2 0 1 0 Transaction ID: C2267265 Amount of Each Receipt this Period 500.00
B. Full Name (Last, First, Middle Initial) Patrick Deluhery Mailing Address 629 Foster Dr City State Zip Code Des Moines IA 50312-2517 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date Amount of Each Receipt this Period 510.00		Date of Receipt M M / D D / Y Y Y Y Y Y 1 0 / 2 7 / 2 0 1 0 Transaction ID: C2261444 Amount of Each Receipt this Period 10.00
C. Full Name (Last, First, Middle Initial) Michael DiCarlo Mailing Address 11832 S Equestrian Trl City State Zip Code Phoenix AZ 85044-3439 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Business Owner Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date Amount of Each Receipt this Period 1000.00		Date of Receipt M M / D D / Y Y Y Y Y Y 1 1 / 0 4 / 2 0 1 0 Transaction ID: C2273432 Amount of Each Receipt this Period 1000.00
SUBTOTAL of Receipts This Page (optional)		1510.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: **PAGE 21 / 175**
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Susan Dietz</p> <p>Mailing Address 915 Suburban St NE</p> <p>City State Zip Code Cedar Rapids IA 52402-1265</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 570.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 27 / 2010</p> <p>Transaction ID: C2264786</p> <p>Amount of Each Receipt this Period 100.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Catherine Dietz-Kilen</p> <p>Mailing Address 645 Polk Blvd.</p> <p>City State Zip Code Des Moines IA 50312</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Harrison & Dietz-Kilen, P.L.C.</p> <p>Occupation Attorney</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2125.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 01 / 2010</p> <p>Transaction ID: C2270016</p> <p>Amount of Each Receipt this Period 500.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Pamela Ann Duffy</p> <p>Mailing Address 28135 J Ave</p> <p>City State Zip Code Adel IA 50003-4506</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Wellmark Blue Cross Blue Shield of IA</p> <p>Occupation Physical Medicine Director</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 275.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 25 / 2010</p> <p>Transaction ID: C2254349</p> <p>Amount of Each Receipt this Period 20.00</p>
<p>SUBTOTAL of Receipts This Page (optional) ▶ 620.00</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 22 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Pamela Ann Duffy Mailing Address 28135 J Ave City Adel State IA Zip Code 50003-4506 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 10 / 27 / 2010 Transaction ID: C2261445 Amount of Each Receipt this Period 50.00
Name of Employer Wellmark Blue Cross Blue Shield of IA Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Physical Medicine Director Election Cycle-to-Date ▼ 275.00		
B. Full Name (Last, First, Middle Initial) Robert E Dvorsky Mailing Address 412 6th. Street City Coralville State IA Zip Code 52241 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 10 / 27 / 2010 Transaction ID: C2251070 Amount of Each Receipt this Period 50.00
Name of Employer State of Iowa/ 6th. District DCS Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation State Senator/ Executive Officer Election Cycle-to-Date ▼ 375.00		
C. Full Name (Last, First, Middle Initial) L. Erlenmeyer-Kimling Mailing Address 1 Briarwood Lane City Stanford State CT Zip Code 06903 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 11 / 01 / 2010 Transaction ID: C2259527 Amount of Each Receipt this Period 400.00
Name of Employer Columbia University Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Professor Election Cycle-to-Date ▼ 400.00		
SUBTOTAL of Receipts This Page (optional)		500.00
TOTAL This Period (last page this line number only)		

10021012455

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: **PAGE 23 / 175**
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Larry J Ervin</p> <p>Mailing Address 314 W Pine St</p> <p>City State Zip Code Eldridge IA 52748-1627</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer M.A. Ford Mfg Co</p> <p>Occupation Quality Control</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 360.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 28 / 2010</p> <p>Transaction ID: C2256661</p> <p>Amount of Each Receipt this Period 55.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Larry J Ervin</p> <p>Mailing Address 314 W Pine St</p> <p>City State Zip Code Eldridge IA 52748-1627</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer M.A. Ford Mfg Co</p> <p>Occupation Quality Control</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 360.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 01 / 2010</p> <p>Transaction ID: C2268134</p> <p>Amount of Each Receipt this Period 25.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Kay Faga</p> <p>Mailing Address 1205 Ridgewood Ave</p> <p>City State Zip Code Ames IA 50010-5207</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 400.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 27 / 2010</p> <p>Transaction ID: C2264814</p> <p>Amount of Each Receipt this Period 100.00</p>
<p>SUBTOTAL of Receipts This Page (optional) ▶ 180.00</p>	
<p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Simona Farrise

Mailing Address 3905 State St
7-505

City State Zip Code
Santa Barbara CA 93105-3138

FEC ID number of contributing
federal political committee.

C

Name of Employer
Farrise Law Firm

Occupation
Attorney

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

MM / DD / YYYY
11 / 04 / 2010

Transaction ID: C2271047

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Martha Ferger

Mailing Address P.O. Box 8

City State Zip Code
Dryden NY 13053

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
420.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2278634

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

E P Fisher

Mailing Address 66 Ralph Ave

City State Zip Code
White Plains NY 10606-3609

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Date of Receipt

MM / DD / YYYY
11 / 02 / 2010

Transaction ID: C2273530

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Jan L Flora

Mailing Address 1902 George Allen Ave

City

Ames

State

IA

Zip Code

50010-5524

FEC ID number of contributing
federal political committee.

C

Name of Employer
Iowa State University

Occupation
Sociologist

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY
10 / 26 / 2010

Transaction ID: C2249343

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Jane C. Forster

Mailing Address 722 Ridge Rd

City

Decorah

State

IA

Zip Code

52101-1120

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

630.00

Date of Receipt

MM / DD / YYYY
10 / 29 / 2010

Transaction ID: C2260026

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Cottin Marty Fritz

Mailing Address 820 Mililani St
Ste 701

City

Honolulu

State

HI

Zip Code

96813-2986

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY
10 / 29 / 2010

Transaction ID: C2259977

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Julie Gammack</p> <p>Mailing Address 1888 Burley Rd</p> <p>City Annapolis State MD Zip Code 21409</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Vistage International Occupation Chair</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2985.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 01 / 2010</p> <p>Transaction ID: C2264599</p> <p>Amount of Each Receipt this Period 500.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Michael Gartner</p> <p>Mailing Address 100 Market St. Suite 515</p> <p>City Des Moines State IA Zip Code 50309</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Iowa Cubs Occupation Owner</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 27 / 2010</p> <p>Transaction ID: C2247259</p> <p>Amount of Each Receipt this Period 500.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Cloma Louise Gates</p> <p>Mailing Address 414 Bryan Rd</p> <p>City Ottumwa State IA Zip Code 52501-1107</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2500.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 27 / 2010</p> <p>Transaction ID: C2261242</p> <p>Amount of Each Receipt this Period 500.00</p>
<p>SUBTOTAL of Receipts This Page (optional) ► 1500.00</p> <p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 27 / 175	
(check only one)			
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	12	<input type="checkbox"/>	13a
<input type="checkbox"/>		<input type="checkbox"/>	13b
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	11d
<input type="checkbox"/>		<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Julia B Gentleman Mailing Address 13603 Sheridan Ave City Urbandale State IA Zip Code 50323-2187 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00		Date of Receipt MM / DD / YYYY 10 / 19 / 2010 Transaction ID: C2234454 Amount of Each Receipt this Period 500.00
B. Full Name (Last, First, Middle Initial) Bernard C Gerstein Mailing Address 1003 Jarrett CR City Ames State IA Zip Code 50014 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1590.00		Date of Receipt MM / DD / YYYY 10 / 19 / 2010 Transaction ID: C2235438 Amount of Each Receipt this Period 100.00
C. Full Name (Last, First, Middle Initial) Bernard C Gerstein Mailing Address 1003 Jarrett CR City Ames State IA Zip Code 50014 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1590.00		Date of Receipt MM / DD / YYYY 10 / 19 / 2010 Transaction ID: C2235646 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)		700.00
TOTAL This Period (last page this line number only)		

10021012460

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

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

FOR LINE NUMBER:		PAGE 28 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Bernard C Gerstein Mailing Address 1003 Jarrett CR City Ames State IA Zip Code 50014 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 50.00		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 25 / 2010 Transaction ID: C2248287
B. Full Name (Last, First, Middle Initial) Bernard C Gerstein Mailing Address 1003 Jarrett CR City Ames State IA Zip Code 50014 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 25.00		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2010 Transaction ID: C2262824
C. Full Name (Last, First, Middle Initial) William E Gluba Mailing Address 2421 N Gaines St City Davenport State IA Zip Code 52804-1910 FEC ID number of contributing federal political committee. C Name of Employer City of Davenport Occupation Mayor Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 295.00		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 27 / 2010 Transaction ID: C2264662
SUBTOTAL of Receipts This Page (optional)		100.00
TOTAL This Period (last page this line number only)		

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

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

FOR LINE NUMBER:		PAGE 29 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Elizabeth Goodwin Mailing Address 3930 Grand Ave Apt 206 City Des Moines State IA Zip Code 50312-3520 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 600.00		Date of Receipt MM / DD / YYYY 10 / 27 / 2010 Transaction ID: C2264832 Amount of Each Receipt this Period 500.00
B. Full Name (Last, First, Middle Initial) Dennis Gray Mailing Address PO Box 1078 City Council Bluffs State IA Zip Code 51502-1078 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 350.00		Date of Receipt MM / DD / YYYY 10 / 27 / 2010 Transaction ID: C2264837 Amount of Each Receipt this Period 100.00
C. Full Name (Last, First, Middle Initial) R. Michael Greenwood Mailing Address 3802 Park Avenue City Des Moines State IA Zip Code 50321 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 325.00		Date of Receipt MM / DD / YYYY 10 / 27 / 2010 Transaction ID: C2253864 Amount of Each Receipt this Period 25.00
SUBTOTAL of Receipts This Page (optional)		625.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 30 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) R. Michael Greenwood Mailing Address 3802 Park Avenue City State Zip Code Des Moines IA 50321 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 325.00		Date of Receipt MM / DD / YYYY 11 / 01 / 2010 Transaction ID: C2269853 Amount of Each Receipt this Period 25.00
B. Full Name (Last, First, Middle Initial) Chester Guinn Mailing Address 1041 8th St City State Zip Code Des Moines IA 50314-2507 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 225.00		Date of Receipt MM / DD / YYYY 10 / 27 / 2010 Transaction ID: C2261479 Amount of Each Receipt this Period 25.00
C. Full Name (Last, First, Middle Initial) John Gunn Mailing Address PO Box 7879 City State Zip Code Northridge CA 91327 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 600.00		Date of Receipt MM / DD / YYYY 11 / 02 / 2010 Transaction ID: C2273485 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Richard A. Gurlain

Mailing Address 11 Park Place

City

New York

State

NY

Zip Code

10007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

MM / DD / YYYY
11 / 01 / 2010

Transaction ID: C2261261

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Charles Hailey

Mailing Address 410 Clearview Ave

City

Friendswood

State

TX

Zip Code

77546-4006

FEC ID number of contributing
federal political committee.

C

Name of Employer
United Space Alliance

Occupation

Engineer

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

MM / DD / YYYY
10 / 29 / 2010

Transaction ID: C2256856

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Timi Hallem

Mailing Address 617 21st Pl

City

Santa Monica

State

CA

Zip Code

90402-3049

FEC ID number of contributing
federal political committee.

C

Name of Employer
Manatt, Phelps & Phillips,
LLP

Occupation

Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
10 / 21 / 2010

Transaction ID: C2271212

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 32 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Kathleen Halloran

Mailing Address 825 17th St SE

City

Cedar Rapids

State

IA

Zip Code

52403-2609

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2450.00

Date of Receipt

MM / DD / YYYY
10 / 19 / 2010

Transaction ID: C2235445

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Linda Hanson

Mailing Address 300 N 11TH ST

City

Indianola

State

IA

Zip Code

50125

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2251205

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Bonnie J Harmon

Mailing Address 222 Wildflower Dr

City

Ames

State

IA

Zip Code

50014-3400

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2261275

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

1375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Susan Elizabeth Harrington

Mailing Address 3016 Northridge Pkwy

City

Ames

State

IA

Zip Code

50014-4581

FEC ID number of contributing
federal political committee.

C

Name of Employer
Payer Law Firm

Occupation
Bookkeeper

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY
10 / 19 / 2010

Transaction ID: C2235451

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Charles William Heckathorne

Mailing Address 906 3rd St

City

Webster City

State

IA

Zip Code

50595-1302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2264850

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Steve Heikens

Mailing Address 700 Lumber Exchange 10 South Fifth

City

Minneapolis

State

MN

Zip Code

55402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Writer and Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
11 / 02 / 2010

Transaction ID: C2270624

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

390.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Thomas Henderson

Mailing Address 6239 N Winwood Dr

City

Johnston

State

IA

Zip Code

50131-2035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Whitfield and Eddy

Occupation
Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1850.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2261490

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Thomas Hennessey

Mailing Address 1100 Forest Drive SE

City

Cedar Rapids

State

IA

Zip Code

52403

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

390.00

Date of Receipt

MM / DD / YYYY
10 / 25 / 2010

Transaction ID: C2248011

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Thomas Hennessey

Mailing Address 1100 Forest Drive SE

City

Cedar Rapids

State

IA

Zip Code

52403

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

390.00

Date of Receipt

MM / DD / YYYY
11 / 01 / 2010

Transaction ID: C2270000

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 35 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Victoria Herring</p> <p>Mailing Address 4331 Greenwood Drive Suite 100</p> <p>City State Zip Code Des Moines IA 50312</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Self Occupation Attorney</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1025.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 29 / 2010</p> <p>Transaction ID: C2259973</p> <p>Amount of Each Receipt this Period 25.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Hasan Hicsasmaz</p> <p>Mailing Address 465 N 7th Ave</p> <p>City State Zip Code Iowa City IA 52245-6006</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Self Occupation Systems Analyst</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 400.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 29 / 2010</p> <p>Transaction ID: C2260103</p> <p>Amount of Each Receipt this Period 100.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Robert Hill</p> <p>Mailing Address 3155 Beech Bluff Road</p> <p>City State Zip Code Jackson TN 38301</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Hill Boren, PC Occupation Attorney</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 01 / 2010</p> <p>Transaction ID: C2255257</p> <p>Amount of Each Receipt this Period 500.00</p>
<p>SUBTOTAL of Receipts This Page (optional) ▶ 625.00</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)
Harlan Daniel Holm, Jr

Mailing Address 808 Ellen St

City State Zip Code
Cedar Falls IA 50613-2361

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ball, Kirk, and Holm PC

Occupation
Attorney

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2525.00

Date of Receipt

MM / DD / YYYY
10 / 19 / 2010

Transaction ID: C2235744

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)
John Wendell Holmes

Mailing Address 531 Commercial St
Ste 612

City State Zip Code
Waterloo IA 50701-5497

FEC ID number of contributing
federal political committee.

C

Name of Employer
Holmes & Holmes

Occupation
Attorney

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1750.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2264860

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Sondra L Holmstrom

Mailing Address 1729 River Forest Dr

City State Zip Code
Fort Dodge IA 50501-7014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Client Security Commission

Occupation
Member

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2264863

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

475.00

TOTAL This Period (last page this line number only)

10021012469

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Lembhard Howell

Mailing Address Law Offices of Lembhard G. Howell,
Pacific Building

City State Zip Code
Seattle WA 98104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Law Offices of Lembhard
G. Howell, P.S.

Occupation
Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3900.00

Date of Receipt

MM / DD / YYYY
10 / 19 / 2010

Transaction ID: C2234465

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Gretchen Jensen

Mailing Address 716 19th St

City State Zip Code
Des Moines IA 50314-1038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Goodman & Associates

Occupation
Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1025.00

Date of Receipt

MM / DD / YYYY
10 / 25 / 2010

Transaction ID: C2254345

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Lila Jensen

Mailing Address 711 Chicago St.

City State Zip Code
Audubon IA 50025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

340.00

Date of Receipt

MM / DD / YYYY
10 / 19 / 2010

Transaction ID: C2235818

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

575.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Lila Jensen</p> <p>Mailing Address 711 Chicago St.</p> <p>City State Zip Code Audubon IA 50025</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 340.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 27 / 2010</p> <p>Transaction ID: C2266174</p> <p>Amount of Each Receipt this Period 40.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Beverly Johnson</p> <p>Mailing Address 15484 Briggs St</p> <p>City State Zip Code Carlisle IA 50047-3148</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 21 / 2010</p> <p>Transaction ID: C2247252</p> <p>Amount of Each Receipt this Period 100.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Homer Kalsem</p> <p>Mailing Address 308 N 4th Ave</p> <p>City State Zip Code Huxley IA 50124-9418</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self Occupation Farmer</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 300.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 19 / 2010</p> <p>Transaction ID: C2235958</p> <p>Amount of Each Receipt this Period 100.00</p>
<p>SUBTOTAL of Receipts This Page (optional) ▶ 240.00</p>	
<p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 39 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Timothy Kniep Mailing Address 458 NE Pinehurst Cir City Ankeny State IA Zip Code 50021-4703 FEC ID number of contributing federal political committee. C Name of Employer Union State Bank Occupation Banker Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 250.00		Date of Receipt 10 / 27 / 2010 Transaction ID: C2261513 Amount of Each Receipt this Period 250.00
B. Full Name (Last, First, Middle Initial) Emily Korzenik Mailing Address 120 Carthage Road City Scarsdale State NY Zip Code 10583 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 250.00		Date of Receipt 10 / 19 / 2010 Transaction ID: C2236026 Amount of Each Receipt this Period 250.00
C. Full Name (Last, First, Middle Initial) John M Kuster Mailing Address 2418 Silverwood Ln City Fairfield State IA Zip Code 52556-8626 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 250.00		Date of Receipt 10 / 27 / 2010 Transaction ID: C2261746 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Janet M Lambert

Mailing Address 1102 Nordic Dr
Unit 122

City

Decorah

State

IA

Zip Code

52101-1084

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2266220

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Donald Land

Mailing Address 17 Haig Point Ct

City

Henderson

State

NV

Zip Code

89052-6474

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Nevada at
Las Vegas

Occupation

Facility Engineer

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

340.00

Date of Receipt

MM / DD / YYYY
10 / 25 / 2010

Transaction ID: C2247884

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Donald Land

Mailing Address 17 Haig Point Ct

City

Henderson

State

NV

Zip Code

89052-6474

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Nevada at
Las Vegas

Occupation

Facility Engineer

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

340.00

Date of Receipt

MM / DD / YYYY
10 / 29 / 2010

Transaction ID: C2261260

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

625.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Lawrence Lapidus</p> <p>Mailing Address 1400 Church Street NW No. 504</p> <p>City State Zip Code Washington DC 20005</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Karp, Frosh, Lapidus, Wigodsky & Norwi</p> <p>Occupation Attorney</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 300.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 27 / 2010</p> <p>Transaction ID: C2267690</p> <p>Amount of Each Receipt this Period 100.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Sean Larson</p> <p>Mailing Address 2712 Woodland Ave</p> <p>City State Zip Code Des Moines IA 50312-5142</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Department of Defense</p> <p>Occupation Information Technology</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 620.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 27 / 2010</p> <p>Transaction ID: C2261515</p> <p>Amount of Each Receipt this Period 100.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Sal A Liccardo</p> <p>Mailing Address 14510 Big Basin Way, #242</p> <p>City State Zip Code Saratoga CA 95070</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer The Liccardo Law Firm</p> <p>Occupation Attorney</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 18 / 2010</p> <p>Transaction ID: C2225964</p> <p>Amount of Each Receipt this Period 500.00</p>
<p>SUBTOTAL of Receipts This Page (optional) 700.00</p> <p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Sarah Lopez Mailing Address PO Box 91 City Santa Rosa State CA Zip Code 95402-0091 FEC ID number of contributing federal political committee. C Name of Employer Stockwell, Harris, Woolverton & Muehl Occupation Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 700.00		Date of Receipt MM / DD / YYYY 10 / 28 / 2010 Transaction ID: C2255614 Amount of Each Receipt this Period 100.00
B. Full Name (Last, First, Middle Initial) Joshua Mandelbaum Mailing Address 128 Fernwood Ave City Davenport State IA Zip Code 52803-3605 FEC ID number of contributing federal political committee. C Name of Employer State of Iowa Occupation Policy Advisor Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 550.00		Date of Receipt MM / DD / YYYY 10 / 27 / 2010 Transaction ID: C2264663 Amount of Each Receipt this Period 50.00
C. Full Name (Last, First, Middle Initial) Charles E. Marberry Mailing Address 5005 160th St NE City Solon State IA Zip Code 52333-9035 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 650.00		Date of Receipt MM / DD / YYYY 11 / 02 / 2010 Transaction ID: C2273537 Amount of Each Receipt this Period 150.00
SUBTOTAL of Receipts This Page (optional)		300.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 43 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Richmond Mayo-Smith	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
Mailing Address 5 Otis Place	Transaction ID: C2248804
City State Zip Code Boston MA 02108	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00
B. Full Name (Last, First, Middle Initial) Veronica McClaskey	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
Mailing Address 6112 NW El Rey Drive	Transaction ID: C2226882
City State Zip Code Camas WA 98607	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C	
Name of Employer Self	Occupation Homemaker
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1950.00
C. Full Name (Last, First, Middle Initial) Veronica McClaskey	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
Mailing Address 6112 NW El Rey Drive	Transaction ID: C2271214
City State Zip Code Camas WA 98607	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C	
Name of Employer Self	Occupation Homemaker
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1950.00
SUBTOTAL of Receipts This Page (optional)	550.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 44 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
 Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Veronica McClaskey Mailing Address 6112 NW El Rey Drive City Camas State WA Zip Code 98607 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Homemaker Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1950.00		Date of Receipt MM / DD / YYYY 10 / 25 / 2010 Transaction ID: C2247914 Amount of Each Receipt this Period 100.00
B. Full Name (Last, First, Middle Initial) Veronica McClaskey Mailing Address 6112 NW El Rey Drive City Camas State WA Zip Code 98607 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Homemaker Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1950.00		Date of Receipt MM / DD / YYYY 10 / 25 / 2010 Transaction ID: C2249159 Amount of Each Receipt this Period 50.00
C. Full Name (Last, First, Middle Initial) Veronica McClaskey Mailing Address 6112 NW El Rey Drive City Camas State WA Zip Code 98607 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Homemaker Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1950.00		Date of Receipt MM / DD / YYYY 10 / 28 / 2010 Transaction ID: C2255649 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)		250.00
TOTAL This Period (last page this line number only)		

10021012477

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 45 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A.	Full Name (Last, First, Middle Initial) Veronica McClaskey		Date of Receipt MM / DD / YYYY 10 / 29 / 2010		
	Mailing Address 6112 NW El Rey Drive		Transaction ID: C2260023		
	City Camas	State WA	Zip Code 98607	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self Occupation Homemaker				
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1950.00			
B.	Full Name (Last, First, Middle Initial) Veronica McClaskey		Date of Receipt MM / DD / YYYY 11 / 01 / 2010		
	Mailing Address 6112 NW El Rey Drive		Transaction ID: C2267469		
	City Camas	State WA	Zip Code 98607	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self Occupation Homemaker				
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1950.00			
C.	Full Name (Last, First, Middle Initial) Debra Kay McKinney		Date of Receipt MM / DD / YYYY 10 / 19 / 2010		
	Mailing Address 32115 Booneville Rd		Transaction ID: C2235747		
	City Waukee	State IA	Zip Code 50263-7043	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CompLogic Occupation Auditor				
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1500.00			
SUBTOTAL of Receipts This Page (optional)			550.00		
TOTAL This Period (last page this line number only)					

10021012478

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Mary Alice McLarty

Mailing Address 6407 Clubhouse Cir

City

Dallas

State

TX

Zip Code

75240

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3112.10

Date of Receipt

MM / DD / YYYY
10 / 25 / 2010

Transaction ID: C2245935

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Estella Michels

Mailing Address 136 Gay St

City

Manchester

State

IA

Zip Code

52057

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
11 / 01 / 2010

Transaction ID: C2269887

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Thomas G Mortenson

Mailing Address 723 Fox Run Dr

City

Oskaloosa

State

IA

Zip Code

52577-4140

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Higher Ed Policy

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2261243

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1025.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Feticia Mullin

Mailing Address 1916 Nash Drive

City

Des Moines

State

IA

Zip Code

50314

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2261596

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Barbara Munson

Mailing Address 1515 Stone Brooke Rd

City

Ames

State

IA

Zip Code

50010-4191

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
10 / 25 / 2010

Transaction ID: C2245753

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Barbara Munson

Mailing Address 1515 Stone Brooke Rd

City

Ames

State

IA

Zip Code

50010-4191

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
11 / 01 / 2010

Transaction ID: C2255195

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 175

(check only one)

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

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Vernon Naffier

Mailing Address 916 SE 3rd Street

City

Ankeny

State

IA

Zip Code

50021

FEC ID number of contributing federal political committee.

C

Name of Employer
Grand View University

Occupation
Instructor

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

376.00

Date of Receipt

MM / DD / YYYY
11 / 01 / 2010

Transaction ID: C2268425

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

James H Nance

Mailing Address 525 N Harbor City Blvd

City

Melbourne

State

FL

Zip Code

32935-6837

FEC ID number of contributing federal political committee.

C

Name of Employer
Nance Cacciatore Hamilton et al.

Occupation
Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2350.00

Date of Receipt

MM / DD / YYYY
10 / 28 / 2010

Transaction ID: C2255615

Amount of Each Receipt this Period

350.00

C.

Full Name (Last, First, Middle Initial)

Anne Nolte

Mailing Address 620 4th St SE

City

Independence

State

IA

Zip Code

50644-3021

FEC ID number of contributing federal political committee.

C

Name of Employer
Independence Comm. Schools

Occupation
Teacher

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
11 / 02 / 2010

Transaction ID: C2273580

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

425.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Anne Oakes</p> <p>Mailing Address 145 Merrill Road</p> <p>City Ludlow State VT Zip Code 05149</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 873.33</p>	<p>Date of Receipt MM / DD / YYYY 10 / 26 / 2010</p> <p>Transaction ID: C2249319</p> <p>Amount of Each Receipt this Period 50.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Anne Oakes</p> <p>Mailing Address 145 Merrill Road</p> <p>City Ludlow State VT Zip Code 05149</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 873.33</p>	<p>Date of Receipt MM / DD / YYYY 11 / 01 / 2010</p> <p>Transaction ID: C2261493</p> <p>Amount of Each Receipt this Period 25.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Anne Oakes</p> <p>Mailing Address 145 Merrill Road</p> <p>City Ludlow State VT Zip Code 05149</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 873.33</p>	<p>Date of Receipt MM / DD / YYYY 11 / 01 / 2010</p> <p>Transaction ID: C2269900</p> <p>Amount of Each Receipt this Period 100.00</p>
<p>SUBTOTAL of Receipts This Page (optional) ► 175.00</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 50 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Charles Paulson Mailing Address 1022 NW Marshall Unit 450 City Portland State OR Zip Code 97209 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y 1 0 / 2 8 / 2 0 1 0 Transaction ID: C2255408 Amount of Each Receipt this Period 1000.00
B. Full Name (Last, First, Middle Initial) Jean Pendleton Mailing Address 4301 20th St City Grinnell State IA Zip Code 50112-8137 FEC ID number of contributing federal political committee. C Name of Employer Pendleton Law Firm PC Occupation Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1790.00		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y 1 0 / 2 5 / 2 0 1 0 Transaction ID: C2254267 Amount of Each Receipt this Period 40.00
C. Full Name (Last, First, Middle Initial) Leslie Osam Pensack Mailing Address 317 S Wilmoth Ave City Ames State IA Zip Code 50014-7569 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y 1 0 / 1 9 / 2 0 1 0 Transaction ID: C2235558 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)		1140.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 51 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
 Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Helena Percas-Ponseti Mailing Address 110 Oakridge Ave City State Zip Code Iowa City IA 52246-2935 FEC ID number of contributing federal political committee. C		Date of Receipt 10 / 27 / 2010 Transaction ID: C2267775 Amount of Each Receipt this Period 50.00
Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 475.00		
B. Full Name (Last, First, Middle Initial) Stephan H. Peskin Mailing Address 20 Vesey St City State Zip Code New York NY 10007 FEC ID number of contributing federal political committee. C		Date of Receipt 10 / 27 / 2010 Transaction ID: C2246003 Amount of Each Receipt this Period 500.00
Name of Employer Tolmage Peskin Harris & Fallick Occupation Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 1677.40		
C. Full Name (Last, First, Middle Initial) Cary Peterson Mailing Address 501 Haverford Dr City State Zip Code Lincoln NE 68510-2319 FEC ID number of contributing federal political committee. C		Date of Receipt 11 / 02 / 2010 Transaction ID: C2273482 Amount of Each Receipt this Period 500.00
Name of Employer Southwest Nebraska Hematology and Onco Occupation Physician Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00		
SUBTOTAL of Receipts This Page (optional)		1050.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Diane Pickle

Mailing Address 2015 39th St

City

Des Moines

State

IA

Zip Code

50310

FEC ID number of contributing
federal political committee.

C

Name of Employer
Holmes Murphy & Associates

Occupation
Accountant

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

265.00

Date of Receipt

MM / DD / YYYY
11 / 01 / 2010

Transaction ID: C2267266

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Ralph Pittle

Mailing Address 5355 204th Place NE

City

Redmond

State

WA

Zip Code

98053

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medical Legal Consultants
of Washington

Occupation
Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2254094

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Christopher Placitella

Mailing Address 15 Goose Point Drive

City

Colts Neck

State

NJ

Zip Code

07722

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cohen Placitella & Roth
PC

Occupation
Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
10 / 19 / 2010

Transaction ID: C2234534

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

725.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 53 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Christopher Placitella Mailing Address 15 Goose Point Drive City Colts Neck State NJ Zip Code 07722 FEC ID number of contributing federal political committee. C Name of Employer Cohen Placitella & Roth PC Occupation Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 300.00		Date of Receipt MM / DD / YYYY 10 / 19 / 2010 Transaction ID: C2234557 Amount of Each Receipt this Period 100.00
B. Full Name (Last, First, Middle Initial) Alta Price Mailing Address 4888 School House Rd City Bettendorf State IA Zip Code 52722-6576 FEC ID number of contributing federal political committee. C Name of Employer Metropolitan Medical Labs Occupation Physician Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00		Date of Receipt MM / DD / YYYY 10 / 27 / 2010 Transaction ID: C2264687 Amount of Each Receipt this Period 250.00
C. Full Name (Last, First, Middle Initial) Greta Pruitt Mailing Address 2330 Shields Street City La Crescenta State CA Zip Code 91214 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 300.00		Date of Receipt MM / DD / YYYY 10 / 25 / 2010 Transaction ID: C2248740 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)		450.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Barbara A Pursey

Mailing Address 2930 Brueck Rd

City

Dubuque

State

IA

Zip Code

52001-1042

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
11 / 02 / 2010

Transaction ID: C2273584

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Herman Charles Quirnbach

Mailing Address 1002 Jarrett Cir

City

Ames

State

IA

Zip Code

50014-3937

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation

State Senator

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

525.00

Date of Receipt

MM / DD / YYYY
10 / 19 / 2010

Transaction ID: C2235696

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Charles Read

Mailing Address 3 Glenview Knoll NE

City

Iowa City

State

IA

Zip Code

52240

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

305.00

Date of Receipt

MM / DD / YYYY
10 / 21 / 2010

Transaction ID: C2247273

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Charles Read</p> <p>Mailing Address 3 Glenview Knoll NE</p> <p>City State Zip Code Iowa City IA 52240</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Occupation Retired Retired</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <input type="text" value="305.00"/></p>	<p>Date of Receipt <input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2010"/></p> <p>Transaction ID: C2271048</p> <p>Amount of Each Receipt this Period <input type="text" value="50.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Rebecca Reiter</p> <p>Mailing Address 265 Highland Dr</p> <p>City State Zip Code Iowa City IA 52246-3228</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Occupation University of Iowa Research Asst.</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <input type="text" value="375.00"/></p>	<p>Date of Receipt <input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2010"/></p> <p>Transaction ID: C2273585</p> <p>Amount of Each Receipt this Period <input type="text" value="100.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Karl Rhomberg</p> <p>Mailing Address 3330 Tremont Ave</p> <p>City State Zip Code Davenport IA 52803-1327</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Occupation Brammer Mfg. District Manager</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <input type="text" value="700.00"/></p>	<p>Date of Receipt <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/></p> <p>Transaction ID: C2264692</p> <p>Amount of Each Receipt this Period <input type="text" value="200.00"/></p>
<p>SUBTOTAL of Receipts This Page (optional) <input type="text" value="350.00"/></p>	
<p>TOTAL This Period (last page this line number only) <input type="text"/></p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Mary Elaine Richards</p>	<p>Mailing Address 3217 West Street</p>	<p>City State Zip Code Ames IA 50014</p>	<p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p>	<p>Name of Employer Retired Occupation Retired</p>	<p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Election Cycle-to-Date ▼ <input type="text" value="350.00"/></p>	<p>Date of Receipt <input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/> Transaction ID: C2239633</p>	<p>Amount of Each Receipt this Period <input type="text" value="100.00"/></p>	
<p>B. Full Name (Last, First, Middle Initial) Roger Ries</p>	<p>Mailing Address 408 18th St</p>	<p>City State Zip Code West Des Moines IA 50265-5069</p>	<p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p>	<p>Name of Employer Retired Occupation Retired</p>	<p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Election Cycle-to-Date ▼ <input type="text" value="366.00"/></p>	<p>Date of Receipt <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/> Transaction ID: C2261610</p>	<p>Amount of Each Receipt this Period <input type="text" value="50.00"/></p>	
<p>C. Full Name (Last, First, Middle Initial) James Richard Riordan</p>	<p>Mailing Address 7707 Ashworth Rd.</p>	<p>City State Zip Code West Des Moines IA 50266</p>	<p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p>	<p>Name of Employer State of Iowa Occupation Administrator</p>	<p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Election Cycle-to-Date ▼ <input type="text" value="350.00"/></p>	<p>Date of Receipt <input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/> Transaction ID: C2225715</p>	<p>Amount of Each Receipt this Period <input type="text" value="100.00"/></p>	
<p>SUBTOTAL of Receipts This Page (optional)</p>							<p><input type="text" value="250.00"/></p>	<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER: PAGE 57 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Sandra H Robinson

Mailing Address 1359 Kalmia Road, NW

City

Washington

State

DC

Zip Code

20012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jack H. Olender & Assoc.,
P.C.

Occupation

Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2970.70

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2250927

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Ward Rouse

Mailing Address 15150 Wildwood Drive

City

Clive

State

IA

Zip Code

50325

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2251178

Amount of Each Receipt this Period

600.00

C.

Full Name (Last, First, Middle Initial)

Patrick A. Salvi

Mailing Address 218 N Martin Luther King Jr Avenue

City

Waukegan

State

IL

Zip Code

60085

FEC ID number of contributing
federal political committee.

C

Name of Employer
Salvi, Schostok & Pritchard

Occupation

Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2254256

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

John Sarcone

Mailing Address 3004 SW 39th St

City

Des Moines

State

IA

Zip Code

50321-1334

FEC ID number of contributing
federal political committee.

C

Name of Employer
Polk County

Occupation

County Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2267811

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Wayne Schnepf

Mailing Address 39292 140th St

City

Le Mars

State

IA

Zip Code

51031-8586

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Farmer

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

MM / DD / YYYY
11 / 02 / 2010

Transaction ID: C2273588

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Doraine Schuling

Mailing Address 6730 NE 56th St

City

Altoona

State

IA

Zip Code

50009-9481

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

632.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2267830

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

10021012491

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 59 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Donald Shaffer Mailing Address 416 Cory Drive City Ottumwa State IA Zip Code 52501 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 310.00		Date of Receipt MM / DD / YYYY 10 / 25 / 2010 Transaction ID: C2248204 Amount of Each Receipt this Period 25.00
B. Full Name (Last, First, Middle Initial) Michael Shear Mailing Address 3903 Welker Ave City Des Moines State IA Zip Code 50312-3057 FEC ID number of contributing federal political committee. C Name of Employer POCKETS Distributed Workplace Alternat Occupation Owner Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 446.00		Date of Receipt MM / DD / YYYY 10 / 27 / 2010 Transaction ID: C2261716 Amount of Each Receipt this Period 25.00
C. Full Name (Last, First, Middle Initial) Ann Shires Mailing Address 301 Woodridge Ave City Iowa City State IA Zip Code 52245-6055 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 10 / 27 / 2010 Transaction ID: C2267835 Amount of Each Receipt this Period 50.00
SUBTOTAL of Receipts This Page (optional) ▶		100.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Patricia Shors

Mailing Address 2950 SW 30th St

City

Des Moines

State

IA

Zip Code

50321-1413

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mercy Hospital

Occupation
Auxiliary

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

516.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2261245

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

William Royce Shuttleworth

Mailing Address 130 Thompson Dr SE
Apt 114

City

Cedar Rapids

State

IA

Zip Code

52403-1739

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1400.00

Date of Receipt

MM / DD / YYYY
10 / 18 / 2010

Transaction ID: C2231955

Amount of Each Receipt this Period

1200.00

C.

Full Name (Last, First, Middle Initial)

Vicki Slater

Mailing Address 1554 Lakeside Drive
P.O. Box 23981

City

Jackson

State

MS

Zip Code

39216

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3900.00

Date of Receipt

MM / DD / YYYY
11 / 01 / 2010

Transaction ID: C2262957

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Russell Smith

Mailing Address 159 S. Main Street
Suite 503

City State Zip Code
Akron OH 44308

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
10 / 18 / 2010

Transaction ID: C2223505

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Leonard Stephenson

Mailing Address 328 E Reed St
7

City State Zip Code
Ute IA 51060-1024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
11 / 02 / 2010

Transaction ID: C2273592

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Al J Sturgeon

Mailing Address 507 7th Street
Suite 540

City State Zip Code
Sioux City IA 51101-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
10 / 19 / 2010

Transaction ID: C2234566

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Charles Leon Sweetman

Mailing Address 361 S Pennsylvania Ave
Apt 1A

City State Zip Code
Mason City IA 50401-3749

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
550.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2268086

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Tyler Thompson

Mailing Address 1004 Dorset Court

City State Zip Code
Goshen KY 40026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dolt, Thompson, Shepherd,
Kinney and W.

Occupation
Attorney

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
11 / 03 / 2010

Transaction ID: C2271490

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

John L Timmons

Mailing Address 2108 Greeley St

City State Zip Code
Ames IA 50014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pasley and Singer Law Fir-
m, L.L.P.

Occupation
Attorney

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

MM / DD / YYYY
11 / 01 / 2010

Transaction ID: C2267360

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

1150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 63 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)
M. Leanne Tyler

Mailing Address 6551 Eagle Ridge Rd

City State Zip Code
Bettendorf IA 52722-6266

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tyler & Associates PC

Occupation
Attorney

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1535.00

Date of Receipt

MM / DD / YYYY
10 / 22 / 2010

Transaction ID: C2231260

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
M. Leanne Tyler

Mailing Address 6551 Eagle Ridge Rd

City State Zip Code
Bettendorf IA 52722-6266

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tyler & Associates PC

Occupation
Attorney

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1535.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2264700

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)
Cecilie Vaughters-Johnson

Mailing Address 1635 Candace Way

City State Zip Code
Los Altos CA 94024-6243

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2268107

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

585.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)
Judith Wagner

Mailing Address 63 French Road

City State Zip Code
Gilmanton NH 03237

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt

MM / DD / YYYY
11 / 01 / 2010

Transaction ID: C2255646

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Ruth Walker

Mailing Address 2208 Coventry Ln

City State Zip Code
Cedar Falls IA 50613

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
925.00

Date of Receipt

MM / DD / YYYY
10 / 25 / 2010

Transaction ID: C2247981

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
Ruth Walker

Mailing Address 2208 Coventry Ln

City State Zip Code
Cedar Falls IA 50613

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
925.00

Date of Receipt

MM / DD / YYYY
11 / 01 / 2010

Transaction ID: C2261703

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 65 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Ruth Walker

Mailing Address 2208 Coventry Ln

City

Cedar Falls

State

IA

Zip Code

50613

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For: 2010

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

925.00

Date of Receipt

MM / DD / YYYY
11 / 01 / 2010

Transaction ID: C2269914

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Marc Wallace

Mailing Address 2127 E. 29th Street

City

Des Moines

State

IA

Zip Code

50317

FEC ID number of contributing
federal political committee.

C

Name of Employer
Iowa Public Defender's Of-
fice

Occupation

Assistant Public Defender

Receipt For: 2010

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

356.00

Date of Receipt

MM / DD / YYYY
10 / 25 / 2010

Transaction ID: C2254346

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Curt Warneke

Mailing Address 10 Virginia Hills Rd

City

Council Bluffs

State

IA

Zip Code

51503-5700

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For: 2010

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2268116

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 66 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Khara Washington

Mailing Address 2335 Leclaire St

City

Davenport

State

IA

Zip Code

52803-2601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lane & Waterman LLP

Occupation
Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

425.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2010

Transaction ID: C2264701

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

Thomas A Weber

Mailing Address 430 Lynn Ave

City

Ames

State

IA

Zip Code

50014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

435.00

Date of Receipt

MM / DD / YYYY
10 / 19 / 2010

Transaction ID: C2235738

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

Thomas A Weber

Mailing Address 430 Lynn Ave

City

Ames

State

IA

Zip Code

50014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

435.00

Date of Receipt

MM / DD / YYYY
10 / 29 / 2010

Transaction ID: C2260136

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 67 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Phillip Paul Weidner Mailing Address 330 L St Phillip Paul Weidner & Associates, City Anchorage State AK Zip Code 99501-5916 FEC ID number of contributing federal political committee. C Name of Employer Phillip Paul Weidner & Associates, PC Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Attorney Election Cycle-to-Date ▼ 2000.00		Date of Receipt 10 / 27 / 2010 Transaction ID: C2253156 Amount of Each Receipt this Period 250.00
B. Full Name (Last, First, Middle Initial) Phillip Paul Weidner Mailing Address 330 L St Phillip Paul Weidner & Associates, City Anchorage State AK Zip Code 99501-5916 FEC ID number of contributing federal political committee. C Name of Employer Phillip Paul Weidner & Associates, PC Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Attorney Election Cycle-to-Date ▼ 2000.00		Date of Receipt 11 / 02 / 2010 Transaction ID: C2271070 Amount of Each Receipt this Period 250.00
C. Full Name (Last, First, Middle Initial) Roger White Mailing Address 2303 Greenwood Ave City Cedar Falls State IA Zip Code 50613-4519 FEC ID number of contributing federal political committee. C Name of Employer Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Retired Election Cycle-to-Date ▼ 225.00		Date of Receipt 10 / 28 / 2010 Transaction ID: C2255750 Amount of Each Receipt this Period 25.00
SUBTOTAL of Receipts This Page (optional)		525.00
TOTAL This Period (last page this line number only)		

10021012500

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Robert Wilson

Mailing Address 210 2nd St SE
Ste 810

City

Cedar Rapids

State

IA

Zip Code

52401-1407

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

MM / DD / YYYY
10 / 26 / 2010

Transaction ID: C2255501

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Carey Wimer

Mailing Address 9286 Harding Street

City

Indianola

State

IA

Zip Code

50125

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Iowa Clinic

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
11 / 02 / 2010

Transaction ID: C2270623

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Robert R. Worth

Mailing Address 1220 Park Ave
Apt 3B

City

New York

State

NY

Zip Code

10128-1733

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
10 / 28 / 2010

Transaction ID: C2256689

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Brent Calvin Wynja</p> <p>Mailing Address 1012 Hunziker Dr.</p> <p>City State Zip Code Ames IA 50010</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Morgan Stanley Smith Barney</p> <p>Occupation Financial Advisor</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 400.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 19 / 2010</p> <p>Transaction ID: C2235742</p> <p>Amount of Each Receipt this Period 125.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Hartung & Schroeder, LLP</p> <p>Mailing Address Equitable Building 608 Locust Street, Ste. 100</p> <p>City State Zip Code Des Moines IA 50309</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer</p> <p>Occupation</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 21 / 2010</p> <p>Transaction ID: C2246051</p> <p>Amount of Each Receipt this Period 250.00</p> <p>PARTNERSHIP--partners below if itemized</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Brad Schroeder</p> <p>Mailing Address 608 Locust St Ste 100</p> <p>City State Zip Code Des Moines IA 50309</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Hartung & Schroeder L.L.P.</p> <p>Occupation Attorney</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 375.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 21 / 2010</p> <p>Transaction ID: C2279821</p> <p>Amount of Each Receipt this Period 125.00</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Receipts This Page (optional) ▶ 375.00</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 70 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Bostwick, Peterson & Mitchell, LLP Mailing Address Four Embarcadero Center, Suite 750 City San Francisco State CA Zip Code 94111 FEC ID number of contributing federal political committee. C		Date of Receipt 10 / 27 / 2010 Transaction ID: C2261235 Amount of Each Receipt this Period 500.00
Name of Employer Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date 900.00		PARTNERSHIP--partners below if itemized
B. Full Name (Last, First, Middle Initial) James S. Bostwick Mailing Address 4 Embarcadero Center Ste 750 City San Francisco State CA Zip Code 94111 FEC ID number of contributing federal political committee. C		Date of Receipt 10 / 27 / 2010 Transaction ID: C2280086 Amount of Each Receipt this Period 500.00
Name of Employer Bostwick, Peterson & Mitchell Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date 2900.00		[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Walter Costello Mailing Address 314 Essex St City Salem State MA Zip Code 01970-3257 FEC ID number of contributing federal political committee. C		Date of Receipt 10 / 21 / 2010 Transaction ID: C2273871A Amount of Each Receipt this Period 500.00
Name of Employer Self Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date 1500.00		* Earmarked Contribution: See Below
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line number only)		

10021012503

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3535.36

Date of Receipt

MM / DD / YYYY
11 / 02 / 2010

Transaction ID: C2273871AB

Amount of Each Receipt this Period

500.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

B.

Full Name (Last, First, Middle Initial)

Kimberly Dano

Mailing Address 2611 Oakland Ave

City

Nashville

State

TN

Zip Code

37212-5805

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Homemaker

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
10 / 26 / 2010

Transaction ID: C2273614A

Amount of Each Receipt this Period

1000.00

* Earmarked Contribution:
See Below

C.

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3535.36

Date of Receipt

MM / DD / YYYY
11 / 02 / 2010

Transaction ID: C2273614AB

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Veronica McClaskey</p> <p>Mailing Address 6112 NW El Rey Drive</p> <p>City Camas State WA Zip Code 98607</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self Occupation Homemaker</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1950.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 11 / 2010</p> <p>Transaction ID: C2236078A</p> <p>Amount of Each Receipt this Period 50.00</p> <p>* Earmarked Contribution: See Below</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) ActBlue</p> <p>Mailing Address PO Box 382110</p> <p>City Cambridge State MA Zip Code 02238-2110</p> <p>FEC ID number of contributing federal political committee. C C00401224</p> <p>Name of Employer Occupation Conduit total listed in Agg. field</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 3535.36</p>	<p>Date of Receipt MM / DD / YYYY 10 / 19 / 2010</p> <p>Transaction ID: C2236078AB</p> <p>Amount of Each Receipt this Period 50.00</p> <p>[MEMO ITEM] Note: Above Contribution earmarked through this organization.</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) David Earl Osterberg</p> <p>Mailing Address 318 2nd Ave. NW</p> <p>City Mount Vernon State IA Zip Code 52314</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer University of Iowa Occupation Associate Professor</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 20 / 2010</p> <p>Transaction ID: C2273869A</p> <p>Amount of Each Receipt this Period 250.00</p> <p>* Earmarked Contribution: See Below</p>
<p>SUBTOTAL of Receipts This Page (optional) 300.00</p> <p>TOTAL This Period (last page this line number only)</p>	

10021012505

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 175

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3535.36

Date of Receipt

MM / DD / YYYY
11 / 02 / 2010

Transaction ID: C2273869AB

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

B.

Full Name (Last, First, Middle Initial)

Dennis C Schemmel

Mailing Address 8200 NW 114th street

City

Grimes

State

IA

Zip Code

50111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hawkeye Commodities Compa-
ny

Occupation

Business Msn

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
10 / 07 / 2010

Transaction ID: C2236070A

Amount of Each Receipt this Period

400.00

* Earmarked Contribution:
See Below

C.

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3535.36

Date of Receipt

MM / DD / YYYY
10 / 19 / 2010

Transaction ID: C2236070AB

Amount of Each Receipt this Period

400.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 74 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) William Thele</p> <p>Mailing Address 6997 Hunt Road</p> <p>City State Zip Code Burlington IA 52601</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Burlington Community School District Occupation Technology Support Specialist</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 550.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 27 / 2010</p> <p>Transaction ID: C2273618A</p> <p>Amount of Each Receipt this Period 100.00</p> <p>* Earmarked Contribution: See Below</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) ActBlue</p> <p>Mailing Address PO Box 382110</p> <p>City State Zip Code Cambridge MA 02238-2110</p> <p>FEC ID number of contributing federal political committee. C C00401224</p> <p>Name of Employer Occupation Conduit total listed in Agg. field</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 3535.36</p>	<p>Date of Receipt MM / DD / YYYY 11 / 02 / 2010</p> <p>Transaction ID: C2273618AB</p> <p>Amount of Each Receipt this Period 100.00</p> <p>[MEMO ITEM] Note: Above Contribution earmarked through this organization.</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) William Thele</p> <p>Mailing Address 6997 Hunt Road</p> <p>City State Zip Code Burlington IA 52601</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Burlington Community School District Occupation Technology Support Specialist</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 550.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 19 / 2010</p> <p>Transaction ID: C2273866A</p> <p>Amount of Each Receipt this Period 100.00</p> <p>* Earmarked Contribution: See Below</p>
<p>SUBTOTAL of Receipts This Page (optional) ▶ 200.00</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

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

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

FOR LINE NUMBER:		PAGE 75 / 175	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

FEC ID number of contributing
federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼ Election Cycle-to-Date ▼ 3535.36

Date of Receipt

MM / DD / YYYY
11 / 02 / 2010

Transaction ID: C2273866AB

Amount of Each Receipt this Period

100.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

44205.00

10021012508

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 175
(check only one)
☐ 11a ☒ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Adams County Democratic Central Committee</p> <p>Mailing Address 1600 Grove Ave</p> <p>City State Zip Code Corning IA 50841-1073</p> <p>FEC ID number of contributing federal political committee. <input type="checkbox"/> C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 100.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 19 / 2010</p> <p>Transaction ID: C2234613</p> <p>Amount of Each Receipt this Period 100.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Boone County Democratic Central Committee</p> <p>Mailing Address 1549 T Avenue</p> <p>City State Zip Code Boone IA 50036</p> <p>FEC ID number of contributing federal political committee. <input type="checkbox"/> C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 200.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 21 / 2010</p> <p>Transaction ID: C2246860</p> <p>Amount of Each Receipt this Period 200.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Calhoun County Democratic Central Committee</p> <p>Mailing Address 413 Austin St</p> <p>City State Zip Code Rockwell City IA 50579-1028</p> <p>FEC ID number of contributing federal political committee. <input type="checkbox"/> C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 300.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 27 / 2010</p> <p>Transaction ID: C2261249</p> <p>Amount of Each Receipt this Period 300.00</p>
<p>SUBTOTAL of Receipts This Page (optional) ▶ 600.00</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 175

(check only one)

☐ 11a ☒ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Delaware County Democratic Central Committee	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
Mailing Address 1019 Gales Ave	Transaction ID: C2234623
City State Zip Code Manchester IA 52057-1320	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	
Name of Employer Occupation	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00
B. Full Name (Last, First, Middle Initial) Grundy County Democratic Central Committee	Date of Receipt MM / DD / YYYY 11 / 05 / 2010
Mailing Address 502 I Ave	Transaction ID: C2275585
City State Zip Code Grundy Center IA 50638-1618	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C	
Name of Employer Occupation	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00
C. Full Name (Last, First, Middle Initial) Mills County Democratic Central Committee	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
Mailing Address 210 E Florence Ave	Transaction ID: C2234627
City State Zip Code Glenwood IA 51534-1108	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C	
Name of Employer Occupation	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 100.00
SUBTOTAL of Receipts This Page (optional)	900.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 78 / 175	
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Wayne County Democratic Central Committee		Date of Receipt MM / DD / YYYY 11 / 02 / 2010	
Mailing Address 1191 Vale Rd		Transaction ID: C2273477	
City Humeston	State IA	Zip Code 50123-8065	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	1800.00

10021012511

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 175

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Roxanne Conlin Mailing Address PO Box 876	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
City State Zip Code Des Moines IA 50304-0876	Transaction ID: C2236856
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> S0IA00127	Amount of Each Receipt this Period 668.96
Name of Employer Self Occupation Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1064869.12	* In-Kind: Lodging
B. Full Name (Last, First, Middle Initial) Roxanne Conlin Mailing Address PO Box 876	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
City State Zip Code Des Moines IA 50304-0876	Transaction ID: C2236857
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> S0IA00127	Amount of Each Receipt this Period 57.00
Name of Employer Self Occupation Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1064869.12	* In-Kind: Gas
C. Full Name (Last, First, Middle Initial) Roxanne Conlin Mailing Address PO Box 876	Date of Receipt MM / DD / YYYY 10 / 16 / 2010
City State Zip Code Des Moines IA 50304-0876	Transaction ID: C2236858
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> S0IA00127	Amount of Each Receipt this Period 244.16
Name of Employer Self Occupation Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1064869.12	* In-Kind: Lodging
SUBTOTAL of Receipts This Page (optional)	970.12
TOTAL This Period (last page this line number only)	

10021012512

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 / 175

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Roxanne Conlin

Mailing Address PO Box 876

City

Des Moines

State

IA

Zip Code

50304-0876

FEC ID number of contributing
federal political committee.

C S0IA00127

Name of Employer
Self

Occupation
Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1064869.12

Date of Receipt

MM / DD / YYYY
10 / 16 / 2010

Transaction ID: C2236859

Amount of Each Receipt this Period

52.13

* In-Kind: Gas

B.

Full Name (Last, First, Middle Initial)

Roxanne Conlin

Mailing Address PO Box 876

City

Des Moines

State

IA

Zip Code

50304-0876

FEC ID number of contributing
federal political committee.

C S0IA00127

Name of Employer
Self

Occupation
Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1064869.12

Date of Receipt

MM / DD / YYYY
10 / 19 / 2010

Transaction ID: C2280639

Amount of Each Receipt this Period

665.07

* In-Kind: Lodging

C.

Full Name (Last, First, Middle Initial)

Roxanne Conlin

Mailing Address PO Box 876

City

Des Moines

State

IA

Zip Code

50304-0876

FEC ID number of contributing
federal political committee.

C S0IA00127

Name of Employer
Self

Occupation
Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1064869.12

Date of Receipt

MM / DD / YYYY
10 / 19 / 2010

Transaction ID: C2280641

Amount of Each Receipt this Period

62.40

* In-Kind: Meals

SUBTOTAL of Receipts This Page (optional)

779.60

TOTAL This Period (last page this line number only)

10021012513

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 81 / 175

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Roxanne Conlin

Mailing Address PO Box 876

City

Des Moines

State

IA

Zip Code

50304-0876

FEC ID number of contributing
federal political committee.

C S0IA00127

Name of Employer
Self

Occupation

Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1064869.12

Date of Receipt

MM / DD / YYYY
10 / 20 / 2010

Transaction ID: C2280642

Amount of Each Receipt this Period

43.96

* In-Kind: Meals

B.

Full Name (Last, First, Middle Initial)

Roxanne Conlin

Mailing Address PO Box 876

City

Des Moines

State

IA

Zip Code

50304-0876

FEC ID number of contributing
federal political committee.

C S0IA00127

Name of Employer
Self

Occupation

Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1064869.12

Date of Receipt

MM / DD / YYYY
10 / 20 / 2010

Transaction ID: C2280643

Amount of Each Receipt this Period

313.50

* In-Kind: Lodging

C.

Full Name (Last, First, Middle Initial)

Roxanne Conlin

Mailing Address PO Box 876

City

Des Moines

State

IA

Zip Code

50304-0876

FEC ID number of contributing
federal political committee.

C S0IA00127

Name of Employer
Self

Occupation

Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1064869.12

Date of Receipt

MM / DD / YYYY
10 / 23 / 2010

Transaction ID: C2280645

Amount of Each Receipt this Period

399.84

* In-Kind: Lodging

SUBTOTAL of Receipts This Page (optional)

757.30

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 / 175

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Roxanne Conlin</p> <p>Mailing Address PO Box 876</p> <p>City State Zip Code Des Moines IA 50304-0876</p> <p>FEC ID number of contributing federal political committee. C S01A00127</p> <p>Name of Employer Self Occupation Attorney</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1064869.12</p>	<p>Date of Receipt MM / DD / YYYY 10 / 23 / 2010</p> <p>Transaction ID: C2280646</p> <p>Amount of Each Receipt this Period 53.89</p> <p>* In-Kind: Gas</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Roxanne Conlin</p> <p>Mailing Address PO Box 876</p> <p>City State Zip Code Des Moines IA 50304-0876</p> <p>FEC ID number of contributing federal political committee. C S01A00127</p> <p>Name of Employer Self Occupation Attorney</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1064869.12</p>	<p>Date of Receipt MM / DD / YYYY 10 / 29 / 2010</p> <p>Transaction ID: C2280648</p> <p>Amount of Each Receipt this Period 52.25</p> <p>* In-Kind: Gas</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Roxanne Conlin</p> <p>Mailing Address PO Box 876</p> <p>City State Zip Code Des Moines IA 50304-0876</p> <p>FEC ID number of contributing federal political committee. C S01A00127</p> <p>Name of Employer Self Occupation Attorney</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1064869.12</p>	<p>Date of Receipt MM / DD / YYYY 10 / 29 / 2010</p> <p>Transaction ID: C2280649</p> <p>Amount of Each Receipt this Period 62.49</p> <p>* In-Kind: Lodging</p>
<p>SUBTOTAL of Receipts This Page (optional) 168.63</p>	
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 83 / 175	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Roxanne Conlin Mailing Address PO Box 876 City Des Moines State IA Zip Code 50304-0876 FEC ID number of contributing federal political committee. C S0IA00127 Name of Employer Self Occupation Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1064869.12		Date of Receipt M M / D D / Y Y Y Y Y Y 1 0 / 2 9 / 2 0 1 0 Transaction ID: C2280650 Amount of Each Receipt this Period 366.21 * In-Kind: Lodging
B. Full Name (Last, First, Middle Initial) Roxanne Conlin Mailing Address PO Box 876 City Des Moines State IA Zip Code 50304-0876 FEC ID number of contributing federal political committee. C S0IA00127 Name of Employer Self Occupation Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1064869.12		Date of Receipt M M / D D / Y Y Y Y Y Y 1 0 / 2 9 / 2 0 1 0 Transaction ID: C2280651 Amount of Each Receipt this Period 185.88 * In-Kind: Meals
C. Full Name (Last, First, Middle Initial) Roxanne Conlin Mailing Address PO Box 876 City Des Moines State IA Zip Code 50304-0876 FEC ID number of contributing federal political committee. C S0IA00127 Name of Employer Self Occupation Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1064869.12		Date of Receipt M M / D D / Y Y Y Y Y Y 1 0 / 3 0 / 2 0 1 0 Transaction ID: C2280652 Amount of Each Receipt this Period 647.69 * In-Kind: Lodging
SUBTOTAL of Receipts This Page (optional)		1199.78
TOTAL This Period (last page this line number only)		

10021012516

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 175

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Roxanne Conlin

Mailing Address PO Box 876

City

Des Moines

State

IA

Zip Code

50304-0876

FEC ID number of contributing
federal political committee.

C

S0IA00127

Name of Employer
Self

Occupation

Attorney

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1064869.12

Date of Receipt

MM / DD / YYYY
10 / 30 / 2010

Transaction ID: C2280653

Amount of Each Receipt this Period

53.50

* In-Kind: Gas

B.

Full Name (Last, First, Middle Initial)

Roxanne Conlin

Mailing Address PO Box 876

City

Des Moines

State

IA

Zip Code

50304-0876

FEC ID number of contributing
federal political committee.

C

S0IA00127

Name of Employer
Self

Occupation

Attorney

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1064869.12

Date of Receipt

MM / DD / YYYY
10 / 31 / 2010

Transaction ID: C2280654

Amount of Each Receipt this Period

44.00

* In-Kind: Gas

C.

Full Name (Last, First, Middle Initial)

Roxanne Conlin

Mailing Address PO Box 876

City

Des Moines

State

IA

Zip Code

50304-0876

FEC ID number of contributing
federal political committee.

C

S0IA00127

Name of Employer
Self

Occupation

Attorney

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2204.61

Date of Receipt

MM / DD / YYYY
11 / 04 / 2010

Transaction ID: C2280655

Amount of Each Receipt this Period

788.44

* In-Kind: Room Rental and
Refreshments

SUBTOTAL of Receipts This Page (optional)

885.94

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 85 / 175	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
 Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Roxanne Conlin Mailing Address PO Box 876 City Des Moines State IA Zip Code 50304-0876 FEC ID number of contributing federal political committee. C S01A00127 Name of Employer Self Occupation Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2204.61		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 1 0 Transaction ID: C2280656 Amount of Each Receipt this Period 1416.17 * In-Kind: Meals
B. Full Name (Last, First, Middle Initial) Roxanne Conlin Mailing Address PO Box 876 City Des Moines State IA Zip Code 50304-0876 FEC ID number of contributing federal political committee. C S01A00127 Name of Employer Self Occupation Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 0.00		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 1 0 Transaction ID: C2280692 Amount of Each Receipt this Period 500000.00 [MEMO ITEM] * Redesignation of Candidate Loan to Candidate Contribution

SUBTOTAL of Receipts This Page (optional)	1416.17
TOTAL This Period (last page this line number only)	6177.54

B. Form/Schedule : **SA11D**
Transaction ID : **C2280692**

Candidate forgiveness of Loan in amount of \$500,000.00, redesignated as Contribution. See Schedule A for Line 11d

10021012519

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

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

FOR LINE NUMBER:
(check only one)

PAGE 87 / 175

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Act Blue Technical Services</p> <p>Mailing Address PO Box 390728</p> <p>City Cambridge State MA Zip Code 02139-0008</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146689</p> <p>Date of Disbursement 10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 28.89</p>
<p>B. Full Name (Last, First, Middle Initial) Act Blue Technical Services</p> <p>Mailing Address PO Box 390728</p> <p>City Cambridge State MA Zip Code 02139-0008</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146725</p> <p>Date of Disbursement 10 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 4.96</p>
<p>C. Full Name (Last, First, Middle Initial) Act Blue Technical Services</p> <p>Mailing Address PO Box 390728</p> <p>City Cambridge State MA Zip Code 02139-0008</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147463</p> <p>Date of Disbursement 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 0.08</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► 33.93</p> <p>TOTAL This Period (last page this line number only) ►</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012520

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Act Blue Technical Services	Transaction ID: D147464 Date of Disbursement
Mailing Address PO Box 390728	<div> <div>MM / DD / YYYY</div> <div>11 / 05 / 2010</div> </div>
City Cambridge State MA Zip Code 02139-0008	Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Processing Fees Candidate Name	<div> <div>Amount</div> <div>6.39</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Act Blue Technical Services	Transaction ID: D147465 Date of Disbursement
Mailing Address PO Box 390728	<div> <div>MM / DD / YYYY</div> <div>11 / 02 / 2010</div> </div>
City Cambridge State MA Zip Code 02139-0008	Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Processing Fees Candidate Name	<div> <div>Amount</div> <div>99.66</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) American Express	Transaction ID: D146766 Date of Disbursement
Mailing Address 200 Vesey St	<div> <div>MM / DD / YYYY</div> <div>11 / 05 / 2010</div> </div>
City New York State NY Zip Code 10285-1000	Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Processing Fees Candidate Name	<div> <div>Amount</div> <div>569.07</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
SUBTOTAL of Disbursements This Page (optional)	<div> <div>Amount</div> <div>675.12</div> </div>
TOTAL This Period (last page this line number only)	<div> <div>Amount</div> <div></div> </div>

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012521

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

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Authorize.Net</p> <p>Mailing Address 808 E Utah Valley Dr</p> <p>City American Fork State UT Zip Code 84003-9707</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146743</p> <p>Date of Disbursement MM / DD / YYYY 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 36.65</p>
<p>B. Full Name (Last, First, Middle Initial) Authorize.Net</p> <p>Mailing Address 808 E Utah Valley Dr</p> <p>City American Fork State UT Zip Code 84003-9707</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146744</p> <p>Date of Disbursement MM / DD / YYYY 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 90.55</p>
<p>C. Full Name (Last, First, Middle Initial) Blue State Digital</p> <p>Mailing Address 734 15th St NW Ste 1200</p> <p>City Washington State DC Zip Code 20005-1013</p> <p>Purpose of Disbursement Licensing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146797</p> <p>Date of Disbursement MM / DD / YYYY 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 1389.50</p>
<p>SUBTOTAL of Disbursements This Page (optional) ►</p> <p>TOTAL This Period (last page this line number only) ►</p>	

1516.70

1389.50

**SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bremer Bank</p> <p>Mailing Address PO Box 847 1100 W Street Germain</p> <p>City Saint Cloud State MN Zip Code 56302-0847</p> <p>Purpose of Disbursement Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147459</p> <p>Date of Disbursement MM / DD / YYYY 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 12.83</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Benjamin Busiek</p> <p>Mailing Address 1407 41st Street</p> <p>City Des Moines State IA Zip Code 50311</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146768</p> <p>Date of Disbursement MM / DD / YYYY 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 918.74</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Benjamin Busiek</p> <p>Mailing Address 1407 41st Street</p> <p>City Des Moines State IA Zip Code 50311</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146754</p> <p>Date of Disbursement MM / DD / YYYY 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 918.74</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 1850.31</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

**SCHEDULE B (FEC Form 3)
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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Benjamin Busiek</p> <p>Mailing Address 1407 41st Street</p> <p>City Des Moines State IA Zip Code 50311</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D146691</p> <p>Date of Disbursement 10 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 918.74</p>
<p>B. Full Name (Last, First, Middle Initial) Buying Time, LLC Media</p> <p>Mailing Address 650 Massachusetts Avenue, NW Ste</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement TV Production and Buy</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D146703</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 265480.87</p>
<p>C. Full Name (Last, First, Middle Initial) Elaine Cartas</p> <p>Mailing Address 11234 Greycliff Avenue</p> <p>City Montclair State CA Zip Code 91763</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D146692</p> <p>Date of Disbursement 10 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 896.93</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	
<p>267296.54</p>	

FESAN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012524

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Elaine Cartas</p>	<p>Transaction ID: D146755 Date of Disbursement</p>
<p>Mailing Address 11234 Greycliff Avenue</p>	<p><input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 11 / 05 / 2010</p>
<p>City Montclair State CA Zip Code 91763</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Payroll Candidate Name</p>	<p><input type="text"/> 896.93</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>B. Full Name (Last, First, Middle Initial) Elaine Cartas</p>	<p>Transaction ID: D146769 Date of Disbursement</p>
<p>Mailing Address 11234 Greycliff Avenue</p>	<p><input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 11 / 19 / 2010</p>
<p>City Montclair State CA Zip Code 91763</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Payroll Candidate Name</p>	<p><input type="text"/> 896.93</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>C. Full Name (Last, First, Middle Initial) Carter Printing</p>	<p>Transaction ID: D146705 Date of Disbursement</p>
<p>Mailing Address 1739 E Grand Ave</p>	<p><input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 22 / 2010</p>
<p>City Des Moines State IA Zip Code 50316-3611</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Printing Candidate Name</p>	<p><input type="text"/> 103.88</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ <input type="text"/> 1897.74</p>	
<p>TOTAL This Period (last page this line number only) ▶ <input type="text"/></p>	

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

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Carter Printing	Transaction ID: D146719 Date of Disbursement
Mailing Address 1739 E Grand Ave	<div> <div>M M / D D / Y Y Y Y Y</div> <div>1 0 / 2 5 / 2 0 1 0</div> </div>
City Des Moines State IA Zip Code 50316-3611	Amount of Each Disbursement this Period
Purpose of Disbursement Printing	<div>2217.52</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Lindi Conover	Transaction ID: D146782 Date of Disbursement
Mailing Address 329 Third Street	<div> <div>M M / D D / Y Y Y Y Y</div> <div>1 1 / 2 2 / 2 0 1 0</div> </div>
City West Des Moines State IA Zip Code 50265	Amount of Each Disbursement this Period
Purpose of Disbursement Mileage	<div>71.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Genevieve Craggs	Transaction ID: D146770 Date of Disbursement
Mailing Address 1719 Grand Ave #228	<div> <div>M M / D D / Y Y Y Y Y</div> <div>1 1 / 1 9 / 2 0 1 0</div> </div>
City Des Moines State IA Zip Code 50304	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>1454.14</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
SUBTOTAL of Disbursements This Page (optional)	<div>3742.66</div>
TOTAL This Period (last page this line number only)	

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

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Genevieve Craggs</p>	<p>Transaction ID: D146701 Date of Disbursement</p>
<p>Mailing Address 1719 Grand Ave #228</p>	<p><input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/></p>
<p>City Des Moines State IA Zip Code 50304</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Payroll</p>	<p><input type="text" value="1454.14"/></p>
<p>Candidate Name</p>	<p><input type="text"/> Category/Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>B. Full Name (Last, First, Middle Initial) Genevieve Craggs</p>	<p>Transaction ID: D146756 Date of Disbursement</p>
<p>Mailing Address 1719 Grand Ave #228</p>	<p><input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2010"/></p>
<p>City Des Moines State IA Zip Code 50304</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Payroll</p>	<p><input type="text" value="1454.14"/></p>
<p>Candidate Name</p>	<p><input type="text"/> Category/Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>C. Full Name (Last, First, Middle Initial) Crystal Clear Water Company</p>	<p>Transaction ID: D146706 Date of Disbursement</p>
<p>Mailing Address 3717 Delaware Ave</p>	<p><input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/></p>
<p>City Des Moines State IA Zip Code 50313-2537</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Water</p>	<p><input type="text" value="132.14"/></p>
<p>Candidate Name</p>	<p><input type="text"/> Category/Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="3040.42"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012527

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

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Crystal Clear Water Company</p> <p>Mailing Address 3717 Delaware Ave</p> <p>City Des Moines State IA Zip Code 50313-2537</p> <p>Purpose of Disbursement Water</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146792</p> <p>Date of Disbursement 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 58.80</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mark J. Daley</p> <p>Mailing Address 13303 Rocklyn Dr</p> <p>City Urbandale State IA Zip Code 50323</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146771</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 4858.11</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mark J. Daley</p> <p>Mailing Address 13303 Rocklyn Dr</p> <p>City Urbandale State IA Zip Code 50323</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146693</p> <p>Date of Disbursement 10 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 4858.11</p>

SUBTOTAL of Disbursements This Page (optional)

9775.02

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.	Full Name (Last, First, Middle Initial) Mark J. Daley	Transaction ID: D146757
	Mailing Address 13303 Rocklyn Dr	Date of Disbursement
	City Urbandale State IA Zip Code 50323	MM / DD / YYYY 11 / 05 / 2010
	Purpose of Disbursement Payroll	Amount of Each Disbursement this Period
	Candidate Name	4858.11
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) DEMOCRACY FOR AMERICA	Transaction ID: D146728
	Mailing Address PO Box 1717	Date of Disbursement
	City Burlington State VT Zip Code 05402	MM / DD / YYYY 11 / 01 / 2010
	Purpose of Disbursement Auto Calls	Amount of Each Disbursement this Period
	Candidate Name	1661.17
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) DEMOCRACY FOR AMERICA	Transaction ID: D146783
	Mailing Address PO Box 1717	Date of Disbursement
	City Burlington State VT Zip Code 05402	MM / DD / YYYY 11 / 22 / 2010
	Purpose of Disbursement Airfare	Amount of Each Disbursement this Period
	Candidate Name	423.18
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

6942.46

TOTAL This Period (last page this line number only)

FESAN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012529

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Dorrian Communications</p>	<p>Transaction ID: D146714 Date of Disbursement</p>
<p>Mailing Address 928 Morton Ave</p>	<p><input type="text" value="10"/> <input type="text" value="MM"/> / <input type="text" value="22"/> <input type="text" value="DD"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="YY"/></p>
<p>City Des Moines State IA Zip Code 50316-1535</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Phone System Rental</p>	<p><input type="text" value="366.76"/></p>
<p>Candidate Name</p>	<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>	
<p>B. Full Name (Last, First, Middle Initial) Jennifer Fiihr</p>	<p>Transaction ID: D146694 Date of Disbursement</p>
<p>Mailing Address 4110 Forest Ave</p>	<p><input type="text" value="10"/> <input type="text" value="MM"/> / <input type="text" value="20"/> <input type="text" value="DD"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="YY"/></p>
<p>City Des Moines State IA Zip Code 50311-2539</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Payroll</p>	<p><input type="text" value="138.52"/></p>
<p>Candidate Name</p>	<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>	
<p>C. Full Name (Last, First, Middle Initial) Jennifer Fiihr</p>	<p>Transaction ID: D146758 Date of Disbursement</p>
<p>Mailing Address 4110 Forest Ave</p>	<p><input type="text" value="11"/> <input type="text" value="MM"/> / <input type="text" value="05"/> <input type="text" value="DD"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="YY"/></p>
<p>City Des Moines State IA Zip Code 50311-2539</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Payroll</p>	<p><input type="text" value="166.23"/></p>
<p>Candidate Name</p>	<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>	
<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="671.51"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

FESAN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012530

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Jennifer Fiihr	Transaction ID: D146772 Date of Disbursement <div> <div>11</div> <div>19</div> <div>2010</div> </div>
Mailing Address 4110 Forest Ave	
City Des Moines State IA Zip Code 50311-2539	Amount of Each Disbursement this Period <div>166.23</div>
Purpose of Disbursement Payroll	
Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
B. Full Name (Last, First, Middle Initial) Sonni Giudicessi	Transaction ID: D146773 Date of Disbursement <div> <div>11</div> <div>19</div> <div>2010</div> </div>
Mailing Address 2508 33rd St	
City Des Moines State IA Zip Code 50310-5105	Amount of Each Disbursement this Period <div>1274.49</div>
Purpose of Disbursement Payroll	
Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
C. Full Name (Last, First, Middle Initial) Sonni Giudicessi	Transaction ID: D146800 Date of Disbursement <div> <div>11</div> <div>22</div> <div>2010</div> </div>
Mailing Address 2508 33rd St	
City Des Moines State IA Zip Code 50310-5105	Amount of Each Disbursement this Period <div>460.50</div>
Purpose of Disbursement Mileage	
Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
SUBTOTAL of Disbursements This Page (optional)	<div>1901.22</div>
TOTAL This Period (last page this line number only)	

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

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

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Sonni Giudicessi</p> <p>Mailing Address 2508 33rd St</p> <p>City Des Moines State IA Zip Code 50310-5105</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146759</p> <p>Date of Disbursement MM / DD / YYYY 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 1274.49</p>
<p>B. Full Name (Last, First, Middle Initial) Sonni Giudicessi</p> <p>Mailing Address 2508 33rd St</p> <p>City Des Moines State IA Zip Code 50310-5105</p> <p>Purpose of Disbursement Mileage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146735</p> <p>Date of Disbursement MM / DD / YYYY 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 125.00</p>
<p>C. Full Name (Last, First, Middle Initial) Sonni Giudicessi</p> <p>Mailing Address 2508 33rd St</p> <p>City Des Moines State IA Zip Code 50310-5105</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146695</p> <p>Date of Disbursement MM / DD / YYYY 10 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 1274.49</p>
<p>SUBTOTAL of Disbursements This Page (optional) ►</p> <p>TOTAL This Period (last page this line number only) ►</p>	

2673.98

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)
Heartland Payment Systems

Mailing Address One Heartland Way

City State Zip Code
Jefferson IN 47130

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D147466
Date of Disbursement

11 / 01 / 2010

Amount of Each Disbursement this Period

15.00

B.

Full Name (Last, First, Middle Initial)
Heritage Computer Services

Mailing Address PO Box 611

City State Zip Code
Des Moines IA 50303-0611

Purpose of Disbursement
Payroll Processing Fees

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D146765
Date of Disbursement

11 / 05 / 2010

Amount of Each Disbursement this Period

48.00

C.

Full Name (Last, First, Middle Initial)
Heritage Computer Services

Mailing Address PO Box 611

City State Zip Code
Des Moines IA 50303-0611

Purpose of Disbursement
Payroll Processing Fees

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D146779
Date of Disbursement

11 / 19 / 2010

Amount of Each Disbursement this Period

48.00

SUBTOTAL of Disbursements This Page (optional) ▶

111.00

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

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

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

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Heritage Computer Services</p> <p>Mailing Address PO Box 611</p> <p>City Des Moines State IA Zip Code 50303-0611</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D146780</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 6210.73</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Heritage Computer Services</p> <p>Mailing Address PO Box 611</p> <p>City Des Moines State IA Zip Code 50303-0611</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D146781</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1595.43</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Heritage Computer Services</p> <p>Mailing Address PO Box 611</p> <p>City Des Moines State IA Zip Code 50303-0611</p> <p>Purpose of Disbursement Payroll Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D146690</p> <p>Date of Disbursement 10 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 48.00</p>
<p>SUBTOTAL of Disbursements This Page (optional) 7854.16</p> <p>TOTAL This Period (last page this line number only)</p>	

FESAN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012534

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

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Heritage Computer Services</p> <p>Mailing Address PO Box 611</p> <p>City Des Moines State IA Zip Code 50303-0611</p> <p>Purpose of Disbursement Payroll Taxes <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146687</p> <p>Date of Disbursement MM / DD / YYYY 10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 6208.44</p>
<p>B. Full Name (Last, First, Middle Initial) Heritage Computer Services</p> <p>Mailing Address PO Box 611</p> <p>City Des Moines State IA Zip Code 50303-0611</p> <p>Purpose of Disbursement Payroll Taxes <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146688</p> <p>Date of Disbursement MM / DD / YYYY 10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1611.20</p>
<p>C. Full Name (Last, First, Middle Initial) Heritage Computer Services</p> <p>Mailing Address PO Box 611</p> <p>City Des Moines State IA Zip Code 50303-0611</p> <p>Purpose of Disbursement Payroll Taxes <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146747</p> <p>Date of Disbursement MM / DD / YYYY 11 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 6210.68</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► 14030.32</p> <p>TOTAL This Period (last page this line number only) ►</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012535

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.	<p>Full Name (Last, First, Middle Initial) Heritage Computer Services</p>	<p>Transaction ID: D146748 Date of Disbursement</p>
	<p>Mailing Address PO Box 611</p>	<p>MM / DD / YYYY 11 / 04 / 2010</p>
	<p>City State Zip Code Des Moines IA 50303-0611</p>	<p>Amount of Each Disbursement this Period</p>
	<p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Category/Type</p>	<p>1601.01</p>
	<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	
B.	<p>Full Name (Last, First, Middle Initial) Jordan Homer</p>	<p>Transaction ID: D146760 Date of Disbursement</p>
	<p>Mailing Address 4720 Mortensen Road #303</p>	<p>MM / DD / YYYY 11 / 05 / 2010</p>
	<p>City State Zip Code Ames IA 50014</p>	<p>Amount of Each Disbursement this Period</p>
	<p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Category/Type</p>	<p>941.55</p>
	<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	
C.	<p>Full Name (Last, First, Middle Initial) Jordan Homer</p>	<p>Transaction ID: D146721 Date of Disbursement</p>
	<p>Mailing Address 4720 Mortensen Road #303</p>	<p>MM / DD / YYYY 10 / 25 / 2010</p>
	<p>City State Zip Code Ames IA 50014</p>	<p>Amount of Each Disbursement this Period</p>
	<p>Purpose of Disbursement Mileage</p> <p>Candidate Name</p> <p>Category/Type</p>	<p>308.00</p>
	<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	
<p>SUBTOTAL of Disbursements This Page (optional)</p>		<p>2850.56</p>
<p>TOTAL This Period (last page this line number only)</p>		

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012536

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Jordan Homer</p>	<p>Transaction ID: D146696 Date of Disbursement</p>
<p>Mailing Address 4720 Mortensen Road #303</p>	<p><input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="20"/> <input type="text" value="0"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="0"/></p>
<p>City Ames State IA Zip Code 50014</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Payroll</p>	<p><input type="text" value="941.55"/></p>
<p>Candidate Name</p>	<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>B. Full Name (Last, First, Middle Initial) Jordan Homer</p>	<p>Transaction ID: D146715 Date of Disbursement</p>
<p>Mailing Address 4720 Mortensen Road #303</p>	<p><input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="22"/> <input type="text" value="2"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="0"/></p>
<p>City Ames State IA Zip Code 50014</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Mileage</p>	<p><input type="text" value="43.00"/></p>
<p>Candidate Name</p>	<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>C. Full Name (Last, First, Middle Initial) Jordan Homer</p>	<p>Transaction ID: D146750 Date of Disbursement</p>
<p>Mailing Address 4720 Mortensen Road #303</p>	<p><input type="text" value="11"/> <input type="text" value="1"/> / <input type="text" value="04"/> <input type="text" value="4"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="0"/></p>
<p>City Ames State IA Zip Code 50014</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Mileage</p>	<p><input type="text" value="150.00"/></p>
<p>Candidate Name</p>	<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>SUBTOTAL of Disbursements This Page (optional) <input type="text" value="1134.55"/></p>	
<p>TOTAL This Period (last page this line number only) <input type="text"/></p>	

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Jordan Homer	Transaction ID: D146774 Date of Disbursement
Mailing Address 4720 Mortensen Road #303	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>11 / 19 / 2010</div>
City Ames State IA Zip Code 50014	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll Candidate Name	<div> <div>Category/Type</div> <div>941.55</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
B. Full Name (Last, First, Middle Initial) Bruce Hunter	Transaction ID: D146775 Date of Disbursement
Mailing Address 452 Wilmers Avneue	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>11 / 19 / 2010</div>
City Des Moines State IA Zip Code 50315	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll Candidate Name	<div> <div>Category/Type</div> <div>1223.40</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
C. Full Name (Last, First, Middle Initial) Bruce Hunter	Transaction ID: D146697 Date of Disbursement
Mailing Address 452 Wilmers Avneue	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>10 / 20 / 2010</div>
City Des Moines State IA Zip Code 50315	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll Candidate Name	<div> <div>Category/Type</div> <div>1223.40</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
SUBTOTAL of Disbursements This Page (optional)	<div>3388.35</div>
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Bruce Hunter	Transaction ID: D146761 Date of Disbursement
Mailing Address 452 Wilmers Avneue	<div> <div>MM</div> <div>DD</div> <div>YY</div> <div>YY</div> <div>YY</div> <div>YY</div> </div> <div>11 / 05 / 2010</div>
City Des Moines State IA Zip Code 50315	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>1223.40</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Sara Kanawati	Transaction ID: D146762 Date of Disbursement
Mailing Address 300 E Grand Ave Apt 503	<div> <div>MM</div> <div>DD</div> <div>YY</div> <div>YY</div> <div>YY</div> <div>YY</div> </div> <div>11 / 05 / 2010</div>
City Des Moines State IA Zip Code 50309-1843	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>2398.86</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Sara Kanawati	Transaction ID: D146698 Date of Disbursement
Mailing Address 300 E Grand Ave Apt 503	<div> <div>MM</div> <div>DD</div> <div>YY</div> <div>YY</div> <div>YY</div> <div>YY</div> </div> <div>10 / 20 / 2010</div>
City Des Moines State IA Zip Code 50309-1843	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>2398.86</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
SUBTOTAL of Disbursements This Page (optional)	<div>6021.12</div>
TOTAL This Period (last page this line number only)	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012539

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

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Sara Kanawati</p> <p>Mailing Address 300 E Grand Ave Apt 503</p> <p>City Des Moines State IA Zip Code 50309-1843</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146776</p> <p>Date of Disbursement MM / DD / YYYY 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 2398.86</p>
<p>B. Full Name (Last, First, Middle Initial) Koch Brothers</p> <p>Mailing Address PO Box 1755</p> <p>City Des Moines State IA Zip Code 50306-1755</p> <p>Purpose of Disbursement Copies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146790</p> <p>Date of Disbursement MM / DD / YYYY 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 120.76</p>
<p>C. Full Name (Last, First, Middle Initial) Koch Brothers</p> <p>Mailing Address PO Box 1755</p> <p>City Des Moines State IA Zip Code 50306-1755</p> <p>Purpose of Disbursement Copies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146791</p> <p>Date of Disbursement MM / DD / YYYY 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 926.64</p>
<p>SUBTOTAL of Disbursements This Page (optional) ►</p> <p>TOTAL This Period (last page this line number only) ►</p>	

3446.26

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

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Koch Brothers</p>	<p>Transaction ID: D146716 Date of Disbursement</p>
<p>Mailing Address PO Box 1755</p>	<p><input type="text"/> 10 / <input type="text"/> 22 / <input type="text"/> 2010</p>
<p>City Des Moines State IA Zip Code 50306-1755</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Copies</p>	<p><input type="text"/> 745.73</p>
<p>Candidate Name</p>	<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>B. Full Name (Last, First, Middle Initial) Lori Lafave</p>	<p>Transaction ID: D146786 Date of Disbursement</p>
<p>Mailing Address 200 East Jefferson Street</p>	<p><input type="text"/> 11 / <input type="text"/> 22 / <input type="text"/> 2010</p>
<p>City Falls Church State VA Zip Code 22046</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Fundraising Consulting Fees</p>	<p><input type="text"/> 2250.00</p>
<p>Candidate Name</p>	<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>C. Full Name (Last, First, Middle Initial) Link Strategies</p>	<p>Transaction ID: D146730 Date of Disbursement</p>
<p>Mailing Address 300 Walnut St</p>	<p><input type="text"/> 11 / <input type="text"/> 01 / <input type="text"/> 2010</p>
<p>City Des Moines State IA Zip Code 50309-2224</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Research Consulting Fees</p>	<p><input type="text"/> 8000.00</p>
<p>Candidate Name</p>	<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text"/> 10995.73</p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

FESAN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012541

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Sam Lozier</p>	<p>Transaction ID: D146808 Date of Disbursement</p>
<p>Mailing Address 1301 Locust St. Apt 212</p>	<p><input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/></p>
<p>City Des Moines State IA Zip Code 50309</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Payroll</p>	<p><input type="text" value="984.61"/></p>
<p>Candidate Name</p>	<p>Category/Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>	
<p>B. Full Name (Last, First, Middle Initial) Sam Lozier</p>	<p>Transaction ID: D146809 Date of Disbursement</p>
<p>Mailing Address 1301 Locust St. Apt 212</p>	<p><input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2010"/></p>
<p>City Des Moines State IA Zip Code 50309</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Mileage</p>	<p><input type="text" value="201.65"/></p>
<p>Candidate Name</p>	<p>Category/Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>	
<p>C. Full Name (Last, First, Middle Initial) Sam Lozier</p>	<p>Transaction ID: D146810 Date of Disbursement</p>
<p>Mailing Address 1301 Locust St. Apt 212</p>	<p><input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2010"/></p>
<p>City Des Moines State IA Zip Code 50309</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Payroll</p>	<p><input type="text" value="984.61"/></p>
<p>Candidate Name</p>	<p>Category/Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>	
<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="2170.87"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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FEC Schedule B (Form 3) (Revised 02/2009)

10021012542

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Sam Lozier</p> <p>Mailing Address 1301 Locust St. Apt 212</p> <p>City Des Moines State IA Zip Code 50309</p> <p>Purpose of Disbursement Payroll <input type="checkbox"/> Category/Type</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146811</p> <p>Date of Disbursement MM / DD / YYYY 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 984.61</p>
<p>B. Full Name (Last, First, Middle Initial) Daniel McClung</p> <p>Mailing Address 7614 Camelot Dr Apt 357</p> <p>City Urbandale State IA Zip Code 50322-4557</p> <p>Purpose of Disbursement Payroll <input type="checkbox"/> Category/Type</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146803</p> <p>Date of Disbursement MM / DD / YYYY 10 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 1298.76</p>
<p>C. Full Name (Last, First, Middle Initial) Daniel McClung</p> <p>Mailing Address 7614 Camelot Dr Apt 357</p> <p>City Urbandale State IA Zip Code 50322-4557</p> <p>Purpose of Disbursement Payroll <input type="checkbox"/> Category/Type</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146806</p> <p>Date of Disbursement MM / DD / YYYY 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 1298.76</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 3582.13</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

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FEC Schedule B (Form 3) (Revised 02/2009)

10021012543

**SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Daniel McClung</p> <p>Mailing Address 7614 Camelot Dr Apt 357</p> <p>City Urbandale State IA Zip Code 50322-4557</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146807</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1298.76</p>
<p>B. Full Name (Last, First, Middle Initial) Christopher McClure</p> <p>Mailing Address 2309 Park Ln</p> <p>City West Des Moines State IA Zip Code 50265-4856</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146777</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1133.71</p>
<p>C. Full Name (Last, First, Middle Initial) Christopher McClure</p> <p>Mailing Address 2309 Park Ln</p> <p>City West Des Moines State IA Zip Code 50265-4856</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146763</p> <p>Date of Disbursement 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 1133.76</p>
<p>SUBTOTAL of Disbursements This Page (optional) 3566.23</p> <p>TOTAL This Period (last page this line number only)</p>	

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FEC Schedule B (Form 3) (Revised 02/2009)

10021012544

**SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Christopher McClure</p> <p>Mailing Address 2309 Park Ln</p> <p>City West Des Moines State IA Zip Code 50265-4856</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D146699</p> <p>Date of Disbursement 10 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 1133.71</p>
<p>B. Full Name (Last, First, Middle Initial) Meyer Associates Teleservices</p> <p>Mailing Address 14 North Seventh Avenue</p> <p>City Saint Cloud State MN Zip Code 56303</p> <p>Purpose of Disbursement Telemarketing Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D147460</p> <p>Date of Disbursement 10 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 487.98</p>
<p>C. Full Name (Last, First, Middle Initial) NGP Software, Inc.</p> <p>Mailing Address 1225 I St NW</p> <p>City Washington State DC Zip Code 20005-3914</p> <p>Purpose of Disbursement Data Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D146795</p> <p>Date of Disbursement 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 300.00</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 1921.69</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

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FEC Schedule B (Form 3) (Revised 02/2009)

10021012545

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

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) NGP Software, Inc.</p> <p>Mailing Address 1225 I St NW</p> <p>City Washington State DC Zip Code 20005-3914</p> <p>Purpose of Disbursement Data Services and Licensing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146708</p> <p>Date of Disbursement MM / DD / YYYY 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 2400.00</p>
<p>B. Full Name (Last, First, Middle Initial) Perkins Coie</p> <p>Mailing Address 1201 3rd Ave FI 40</p> <p>City Seattle State WA Zip Code 98101-3029</p> <p>Purpose of Disbursement Legal Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146798</p> <p>Date of Disbursement MM / DD / YYYY 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 313.00</p>
<p>C. Full Name (Last, First, Middle Initial) Political CFO's</p> <p>Mailing Address 201 King Street, Suite 200</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Compliance Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146741</p> <p>Date of Disbursement MM / DD / YYYY 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 62.50</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2775.50

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

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

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Qwest Business Services</p> <p>Mailing Address PO Box 856169</p> <p>City Louisville State KY Zip Code 40285-6169</p> <p>Purpose of Disbursement Phones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146732</p> <p>Date of Disbursement 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 961.99</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Qwest Business Services</p> <p>Mailing Address PO Box 856169</p> <p>City Louisville State KY Zip Code 40285-6169</p> <p>Purpose of Disbursement Phones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146794</p> <p>Date of Disbursement 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 156.33</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Qwest</p> <p>Mailing Address PO Box 91154</p> <p>City Seattle State WA Zip Code 98111-9254</p> <p>Purpose of Disbursement Phones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146793</p> <p>Date of Disbursement 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 245.25</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 1363.57</p>	
<p>TOTAL This Period (last page this line number only) ▶</p>	

10021012547

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Roxanne Conlin</p>	<p>Transaction ID: D140269 Date of Disbursement</p>
<p>Mailing Address PO Box 876</p>	<p>10 / 14 / 2010</p>
<p>City Des Moines State IA Zip Code 50304-0876</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Lodging</p>	<p>668.96</p>
<p>Candidate Name Roxanne Conlin</p>	<p>Category/Type</p>
<p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District:</p>	<p>* In-Kind Received</p>
<p>B. Full Name (Last, First, Middle Initial) Roxanne Conlin</p>	<p>Transaction ID: D140270 Date of Disbursement</p>
<p>Mailing Address PO Box 876</p>	<p>10 / 15 / 2010</p>
<p>City Des Moines State IA Zip Code 50304-0876</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Gas</p>	<p>57.00</p>
<p>Candidate Name Roxanne Conlin</p>	<p>Category/Type</p>
<p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District:</p>	<p>* In-Kind Received</p>
<p>C. Full Name (Last, First, Middle Initial) Roxanne Conlin</p>	<p>Transaction ID: D140271 Date of Disbursement</p>
<p>Mailing Address PO Box 876</p>	<p>10 / 16 / 2010</p>
<p>City Des Moines State IA Zip Code 50304-0876</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Lodging</p>	<p>244.16</p>
<p>Candidate Name Roxanne Conlin</p>	<p>Category/Type</p>
<p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District:</p>	<p>* In-Kind Received</p>
<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>970.12</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Roxanne Conlin</p> <p>Mailing Address PO Box 876</p> <p>City Des Moines State IA Zip Code 50304-0876</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name Roxanne Conlin</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IA District:</p>	<p>Transaction ID: D140272</p> <p>Date of Disbursement 10 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 52.13</p> <p>* In-Kind Received</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Roxanne Conlin</p> <p>Mailing Address PO Box 876</p> <p>City Des Moines State IA Zip Code 50304-0876</p> <p>Purpose of Disbursement Lodging</p> <p>Candidate Name Roxanne Conlin</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IA District:</p>	<p>Transaction ID: D147748</p> <p>Date of Disbursement 10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 665.07</p> <p>* In-Kind Received</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Roxanne Conlin</p> <p>Mailing Address PO Box 876</p> <p>City Des Moines State IA Zip Code 50304-0876</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name Roxanne Conlin</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IA District:</p>	<p>Transaction ID: D147750</p> <p>Date of Disbursement 10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 62.40</p> <p>* In-Kind Received</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 779.60</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

**SCHEDULE B (FEC Form 3)
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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Roxanne Conlin	Transaction ID: D147751 Date of Disbursement 10 / 20 / 2010
Mailing Address PO Box 876	
City Des Moines State IA Zip Code 50304-0876	Amount of Each Disbursement this Period 43.96
Purpose of Disbursement Meals Candidate Name Roxanne Conlin	Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	* In-Kind Received
B. Full Name (Last, First, Middle Initial) Roxanne Conlin	Transaction ID: D147752 Date of Disbursement 10 / 20 / 2010
Mailing Address PO Box 876	
City Des Moines State IA Zip Code 50304-0876	Amount of Each Disbursement this Period 313.50
Purpose of Disbursement Lodging Candidate Name Roxanne Conlin	Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	* In-Kind Received
C. Full Name (Last, First, Middle Initial) Roxanne Conlin	Transaction ID: D147755 Date of Disbursement 10 / 23 / 2010
Mailing Address PO Box 876	
City Des Moines State IA Zip Code 50304-0876	Amount of Each Disbursement this Period 399.84
Purpose of Disbursement Lodging Candidate Name Roxanne Conlin	Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	* In-Kind Received
SUBTOTAL of Disbursements This Page (optional)	757.30
TOTAL This Period (last page this line number only)	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012550

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

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Roxanne Conlin</p> <p>Mailing Address PO Box 876</p> <p>City Des Moines State IA Zip Code 50304-0876</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name Roxanne Conlin</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IA District:</p>	<p>Transaction ID: D147756</p> <p>Date of Disbursement 10 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 53.89</p> <p>* In-Kind Received</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Roxanne Conlin</p> <p>Mailing Address PO Box 876</p> <p>City Des Moines State IA Zip Code 50304-0876</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name Roxanne Conlin</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IA District:</p>	<p>Transaction ID: D147758</p> <p>Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 52.25</p> <p>* In-Kind Received</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Roxanne Conlin</p> <p>Mailing Address PO Box 876</p> <p>City Des Moines State IA Zip Code 50304-0876</p> <p>Purpose of Disbursement Lodging</p> <p>Candidate Name Roxanne Conlin</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IA District:</p>	<p>Transaction ID: D147759</p> <p>Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 62.49</p> <p>* In-Kind Received</p>
<p>SUBTOTAL of Disbursements This Page (optional) ►</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

168.63

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Roxanne Conlin	Transaction ID: D147761 Date of Disbursement
Mailing Address PO Box 876	<div> <div>MM</div> <div>DD</div> <div>YY</div> </div> <div> <div>10</div> <div>29</div> <div>2010</div> </div>
City Des Moines State IA Zip Code 50304-0876	Amount of Each Disbursement this Period
Purpose of Disbursement Lodging	<div>366.21</div>
Candidate Name Roxanne Conlin	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ * In-Kind Received
B. Full Name (Last, First, Middle Initial) Roxanne Conlin	Transaction ID: D147762 Date of Disbursement
Mailing Address PO Box 876	<div> <div>MM</div> <div>DD</div> <div>YY</div> </div> <div> <div>10</div> <div>29</div> <div>2010</div> </div>
City Des Moines State IA Zip Code 50304-0876	Amount of Each Disbursement this Period
Purpose of Disbursement Meals	<div>185.88</div>
Candidate Name Roxanne Conlin	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ * In-Kind Received
C. Full Name (Last, First, Middle Initial) Roxanne Conlin	Transaction ID: D147764 Date of Disbursement
Mailing Address PO Box 876	<div> <div>MM</div> <div>DD</div> <div>YY</div> </div> <div> <div>10</div> <div>30</div> <div>2010</div> </div>
City Des Moines State IA Zip Code 50304-0876	Amount of Each Disbursement this Period
Purpose of Disbursement Lodging	<div>647.69</div>
Candidate Name Roxanne Conlin	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ * In-Kind Received
SUBTOTAL of Disbursements This Page (optional)	<div>1199.78</div>
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)
Roxanne Conlin

Mailing Address PO Box 876

City Des Moines State IA Zip Code 50304-0876

Purpose of Disbursement
Gas

Candidate Name
Roxanne Conlin

Office Sought: ☐ House
☒ Senate
☐ President

State: IA District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D147766

Date of Disbursement

10 / 30 / 2010

Amount of Each Disbursement this Period

53.50

* In-Kind Received

B.

Full Name (Last, First, Middle Initial)
Roxanne Conlin

Mailing Address PO Box 876

City Des Moines State IA Zip Code 50304-0876

Purpose of Disbursement
Gas

Candidate Name
Roxanne Conlin

Office Sought: ☐ House
☒ Senate
☐ President

State: IA District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D147769

Date of Disbursement

10 / 31 / 2010

Amount of Each Disbursement this Period

44.00

* In-Kind Received

C.

Full Name (Last, First, Middle Initial)
Roxanne Conlin

Mailing Address PO Box 876

City Des Moines State IA Zip Code 50304-0876

Purpose of Disbursement
Room Rental and Refreshments

Candidate Name
Roxanne Conlin

Office Sought: ☐ House
☒ Senate
☐ President

State: IA District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D147771

Date of Disbursement

11 / 04 / 2010

Amount of Each Disbursement this Period

788.44

* In-Kind Received

SUBTOTAL of Disbursements This Page (optional) ▶

885.94

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Roxanne Conlin</p>	<p>Transaction ID: D147774 Date of Disbursement</p>
<p>Mailing Address PO Box 876</p>	<p><input type="text" value="11"/> <input type="text" value="04"/> <input type="text" value="2010"/></p>
<p>City Des Moines State IA Zip Code 50304-0876</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Meals</p>	<p><input type="text" value="1416.17"/></p>
<p>Candidate Name Roxanne Conlin</p>	<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District:</p>	<p>* In-Kind Received</p>
<p>B. Full Name (Last, First, Middle Initial) RSM McGladrey, Inc.</p>	<p>Transaction ID: D146733 Date of Disbursement</p>
<p>Mailing Address 5155 Paysphere Circle</p>	<p><input type="text" value="11"/> <input type="text" value="01"/> <input type="text" value="2010"/></p>
<p>City Chicago State IL Zip Code 60674</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Accounting Services</p>	<p><input type="text" value="400.00"/></p>
<p>Candidate Name</p>	<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	
<p>C. Full Name (Last, First, Middle Initial) Stones' Phones, Inc.</p>	<p>Transaction ID: D146711 Date of Disbursement</p>
<p>Mailing Address 41750 Rancho Las Palmas Dr Ste E3</p>	<p><input type="text" value="10"/> <input type="text" value="22"/> <input type="text" value="2010"/></p>
<p>City Rancho Mirage State CA Zip Code 92270-5512</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Auto Calls</p>	<p><input type="text" value="871.66"/></p>
<p>Candidate Name</p>	<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	
<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="2687.83"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) The Des Moines Register</p> <p>Mailing Address PO Box 3249</p> <p>City Milwaukee State WI Zip Code 53201</p> <p>Purpose of Disbursement Subscription</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D146712</p> <p>Date of Disbursement MM / DD / YYYY 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 28.70</p>
<p>B. Full Name (Last, First, Middle Initial) The Packaging Store</p> <p>Mailing Address 3200 Ingersoll Ave</p> <p>City Des Moines State IA Zip Code 50312-3917</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D146686</p> <p>Date of Disbursement MM / DD / YYYY 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 66.20</p>
<p>C. Full Name (Last, First, Middle Initial) The Southpaw Group</p> <p>Mailing Address Suite 201 316 East Hennepin Avenue</p> <p>City Minneapolis State MN Zip Code 55414</p> <p>Purpose of Disbursement Fundraising Consulting Fees and Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D146736</p> <p>Date of Disbursement MM / DD / YYYY 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 15196.65</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 15291.55</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012555

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

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Trilogy Interactive LLC</p> <p>Mailing Address 961 Ilima Way</p> <p>City Palo Alto State CA Zip Code 94306</p> <p>Purpose of Disbursement Web Ads</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D146796</p> <p>Date of Disbursement MM / DD / YYYY 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 7850.19</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Trilogy Interactive LLC</p> <p>Mailing Address 961 Ilima Way</p> <p>City Palo Alto State CA Zip Code 94306</p> <p>Purpose of Disbursement Fundraising Consulting Fees/Web Ads</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D146740</p> <p>Date of Disbursement MM / DD / YYYY 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 7500.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) United States Postal Service</p> <p>Mailing Address 1165 Second Avenue</p> <p>City Des Moines State IA Zip Code 50318</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D146802</p> <p>Date of Disbursement MM / DD / YYYY 11 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 23.10</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► 15373.29</p> <p>TOTAL This Period (last page this line number only) ►</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012556

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Kendall Vingua</p>	<p>Transaction ID: D146778 Date of Disbursement</p>
<p>Mailing Address 25887 W. Columbia Bay Drive</p>	<p><input type="text" value="11"/> <input type="text" value="19"/> <input type="text" value="2010"/></p>
<p>City Lake Villa State IL Zip Code 60046</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Payroll</p>	<p><input type="text" value="919.74"/></p>
<p>Candidate Name</p>	<p><input type="text" value="Category/Type"/></p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>B. Full Name (Last, First, Middle Initial) Kendall Vingua</p>	<p>Transaction ID: D146764 Date of Disbursement</p>
<p>Mailing Address 25887 W. Columbia Bay Drive</p>	<p><input type="text" value="11"/> <input type="text" value="05"/> <input type="text" value="2010"/></p>
<p>City Lake Villa State IL Zip Code 60046</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Payroll</p>	<p><input type="text" value="919.74"/></p>
<p>Candidate Name</p>	<p><input type="text" value="Category/Type"/></p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>C. Full Name (Last, First, Middle Initial) Kendall Vingua</p>	<p>Transaction ID: D146700 Date of Disbursement</p>
<p>Mailing Address 25887 W. Columbia Bay Drive</p>	<p><input type="text" value="10"/> <input type="text" value="20"/> <input type="text" value="2010"/></p>
<p>City Lake Villa State IL Zip Code 60046</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Payroll</p>	<p><input type="text" value="919.74"/></p>
<p>Candidate Name</p>	<p><input type="text" value="Category/Type"/></p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Carol Wallitt</p> <p>Mailing Address 502 S. 3rd Street</p> <p>City Fairfield State IA Zip Code 52556</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146702</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 40.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Wellmark</p> <p>Mailing Address PO Box 10353</p> <p>City Des Moines State IA Zip Code 50306</p> <p>Purpose of Disbursement Health Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146717</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 2720.20</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Wellmark</p> <p>Mailing Address PO Box 10353</p> <p>City Des Moines State IA Zip Code 50306</p> <p>Purpose of Disbursement Health Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146788</p> <p>Date of Disbursement 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 2720.20</p>
<p>SUBTOTAL of Disbursements This Page (optional) 5480.40</p> <p>TOTAL This Period (last page this line number only)</p>	

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) West Bank</p> <p>Mailing Address PO Box 65020</p> <p>City West Des Moines State IA Zip Code 50265-0020</p> <p>Purpose of Disbursement Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146767</p> <p>Date of Disbursement MM / DD / YYYY 11 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p>Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) West Bank</p> <p>Mailing Address PO Box 65020</p> <p>City West Des Moines State IA Zip Code 50265-0020</p> <p>Purpose of Disbursement Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146745</p> <p>Date of Disbursement MM / DD / YYYY 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 172.18</p> <p>Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) West Bank</p> <p>Mailing Address PO Box 65020</p> <p>City West Des Moines State IA Zip Code 50265-0020</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146746</p> <p>Date of Disbursement MM / DD / YYYY 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 1187.13</p> <p>Category/ Type</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 1379.31</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) West Bank</p> <p>Mailing Address PO Box 65020</p> <p>City West Des Moines State IA Zip Code 50265-0020</p> <p>Purpose of Disbursement Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146726</p> <p>Date of Disbursement MM / DD / YYYY 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 155.40</p>
<p>B. Full Name (Last, First, Middle Initial) West Bank</p> <p>Mailing Address PO Box 65020</p> <p>City West Des Moines State IA Zip Code 50265-0020</p> <p>Purpose of Disbursement Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146727</p> <p>Date of Disbursement MM / DD / YYYY 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 66.78</p>
<p>C. Full Name (Last, First, Middle Initial) Bancard Services</p> <p>Mailing Address PO Box 3038</p> <p>City Evansville State IN Zip Code 47730</p> <p>Purpose of Disbursement Credit Card Payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146704</p> <p>Date of Disbursement MM / DD / YYYY 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 18.85</p>
<p>SUBTOTAL of Disbursements This Page (optional) ►</p> <p>TOTAL This Period (last page this line number only) ►</p>	

241.03

**SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Casey's</p> <p>Mailing Address One SE Convenience Blvd.</p> <p>City Ankeny State IA Zip Code 50021</p> <p>Purpose of Disbursement Beverages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147971</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 1.06</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Dollar Tree</p> <p>Mailing Address 6051 SE 14th Street</p> <p>City Des Moines State IA Zip Code 50321</p> <p>Purpose of Disbursement Candy</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147972</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 57.24</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Robodial.org</p> <p>Mailing Address PO Box 1393</p> <p>City Media State PA Zip Code 19063</p> <p>Purpose of Disbursement Auto Calls</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147969</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 1550.00</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

FESAN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012561

A. Form/Schedule : **SB17**

Offset against overpayment on 8/27.

Transaction ID : **D147971**

B. Form/Schedule : **SB17**

Offset against overpayment on 8/27.

Transaction ID : **D147972**

10021012562

C. Form/Schedule : **SB17**

Offset against overpayment on 8/27.

Transaction ID : **D147969**

10021012563

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

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) John E Kaiser</p> <p>Mailing Address 5800 SE 2nd St</p> <p>City Des Moines State IA Zip Code 50315-5205</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146707</p> <p>Date of Disbursement MM / DD / YYYY 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 232.57</p> <p>Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Home Depot</p> <p>Mailing Address 3700 University Avenue</p> <p>City West Des Moines State IA Zip Code 50266</p> <p>Purpose of Disbursement Sign Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147501</p> <p>Date of Disbursement MM / DD / YYYY 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 232.57</p> <p>Category/ Type</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Paulee Lipsman</p> <p>Mailing Address 2880 Grand Ave Apt 106</p> <p>City Des Moines State IA Zip Code 50312-4273</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146709</p> <p>Date of Disbursement MM / DD / YYYY 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 127.13</p> <p>Category/ Type</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► 359.70</p> <p>TOTAL This Period (last page this line number only) ►</p>	

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

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address 777 Big Timber Rd</p> <p>City Elgin State IL Zip Code 60123-1488</p> <p>Purpose of Disbursement Cell</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147502</p> <p>Date of Disbursement MM / DD / YYYY 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 127.13</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Sara Kanawati</p> <p>Mailing Address 300 E Grand Ave Apt 503</p> <p>City Des Moines State IA Zip Code 50309-1843</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146710</p> <p>Date of Disbursement MM / DD / YYYY 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 2042.27</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) United States Postal Service</p> <p>Mailing Address 1165 Second Avenue</p> <p>City Des Moines State IA Zip Code 50318</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147504</p> <p>Date of Disbursement MM / DD / YYYY 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 2042.27</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► 2042.27</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

FESAN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012565

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Benjamin Busiek</p> <p>Mailing Address 1407 41st Street</p> <p>City Des Moines State IA Zip Code 50311</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146713</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 30.73</p> <p>Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Office Max</p> <p>Mailing Address 2700 Ingersoll Ave</p> <p>City Des Moines State IA Zip Code 50312-5240</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147505</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 30.73</p> <p>[MEMO ITEM]</p> <p>Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bancard Services</p> <p>Mailing Address PO Box 3038</p> <p>City Evansville State IN Zip Code 47730</p> <p>Purpose of Disbursement Credit Card Payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146718</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 9961.21</p> <p>Category/ Type</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► 9991.94</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012566

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

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

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Central Library</p> <p>Mailing Address 1000 Grand Avenue</p> <p>City Des Moines State IA Zip Code 50309</p> <p>Purpose of Disbursement Room Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147881</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 340.00</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Dahl's</p> <p>Mailing Address 3425 Ingersoll Avenue</p> <p>City Des Moines State IA Zip Code 50312</p> <p>Purpose of Disbursement Postage and Beverages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147894</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 47.42</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Dahl's</p> <p>Mailing Address 3425 Ingersoll Avenue</p> <p>City Des Moines State IA Zip Code 50312</p> <p>Purpose of Disbursement Postage and Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147949</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 192.20</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 0.00</p>	
<p>TOTAL This Period (last page this line number only) ▶</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012567

C. Form/Schedule : **SB17**

Offset against overpayment on 9/3.

Transaction ID : **D147949**

10021012568

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

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

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Facebook</p>	<p>Transaction ID: D147953 Date of Disbursement</p>
<p>Mailing Address 1601 S. California Avenue</p>	<p>MM / DD / YYYY 10 / 25 / 2010</p>
<p>City Palo Alto State CA Zip Code 94304</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Web Ads Candidate Name</p>	<p>3136.66</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Facebook</p>	<p>Transaction ID: D147945 Date of Disbursement</p>
<p>Mailing Address 1601 S. California Avenue</p>	<p>MM / DD / YYYY 10 / 25 / 2010</p>
<p>City Palo Alto State CA Zip Code 94304</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Web Ads Candidate Name</p>	<p>6738.45</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) HyVee</p>	<p>Transaction ID: D147940 Date of Disbursement</p>
<p>Mailing Address 1725 Jordan Creek Parkway</p>	<p>MM / DD / YYYY 10 / 25 / 2010</p>
<p>City West Des Moines State IA Zip Code 50266</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Postage and Office Supplies Candidate Name</p>	<p>598.38</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012569

A. Form/Schedule : **SB17**

Offset against overpayment on 9/3.

Transaction ID : **D147953**

10021012570

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

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

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) HyVee</p> <p>Mailing Address 1725 Jordan Creek Parkway</p> <p>City West Des Moines State IA Zip Code 50266</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147876</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 282.19</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mail Trust</p> <p>Mailing Address 5000 Walzem Road</p> <p>City San Antonio State TX Zip Code 78218</p> <p>Purpose of Disbursement Email Server</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147886</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 87.72</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Office Depot</p> <p>Mailing Address 3910 University Ave</p> <p>City West Des Moines State IA Zip Code 50266-1057</p> <p>Purpose of Disbursement Postage and Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147950</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 465.74</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► 0.00</p> <p>TOTAL This Period (last page this line number only) ►</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012571

C. Form/Schedule : **SB17**
Transaction ID : **D147950**

Offset against overpayment on 9/3.

10021012572

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

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

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Office Max	Transaction ID: D147947 Date of Disbursement
Mailing Address 2700 Ingersoll Ave	<div> <div>10</div> <div>25</div> <div>2010</div> </div>
City Des Moines State IA Zip Code 50312-5240	Amount of Each Disbursement this Period
Purpose of Disbursement Office Supplies Candidate Name	<div>74.44</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div> [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Office Max	Transaction ID: D147884 Date of Disbursement
Mailing Address 2700 Ingersoll Ave	<div> <div>10</div> <div>25</div> <div>2010</div> </div>
City Des Moines State IA Zip Code 50312-5240	Amount of Each Disbursement this Period
Purpose of Disbursement Office Supplies Candidate Name	<div>138.95</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div> [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Quik Trip	Transaction ID: D147946 Date of Disbursement
Mailing Address 1421 Ingersoll Avenue	<div> <div>10</div> <div>25</div> <div>2010</div> </div>
City Des Moines State IA Zip Code 50309	Amount of Each Disbursement this Period
Purpose of Disbursement Gas Candidate Name	<div>100.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div> [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional)	<div>0.00</div>
TOTAL This Period (last page this line number only)	

A. Form/Schedule : **SB17**

Offset against overpayment on 9/3.

Transaction ID : **D147947**

C. Form/Schedule : **SB17**

Offset against overpayment on 9/3.

Transaction ID : **D147946**

10021012574

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

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Quik Trip</p>	<p>Transaction ID: D147932 Date of Disbursement</p>
<p>Mailing Address 1421 Ingersoll Avenue</p>	<p><input type="text" value="10"/> <input type="text" value="25"/> <input type="text" value="2010"/></p>
<p>City Des Moines State IA Zip Code 50309</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Wireless Internet Candidate Name</p>	<p><input type="text" value="100.00"/></p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Rackspace</p>	<p>Transaction ID: D147948 Date of Disbursement</p>
<p>Mailing Address 9725 Datapoint Drive, Suite 100</p>	<p><input type="text" value="10"/> <input type="text" value="25"/> <input type="text" value="2010"/></p>
<p>City San Antonio State TX Zip Code 78229</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Email Server Candidate Name</p>	<p><input type="text" value="87.46"/></p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Spring Valley Wireless</p>	<p>Transaction ID: D147930 Date of Disbursement</p>
<p>Mailing Address Kaleidoscope Mall</p>	<p><input type="text" value="10"/> <input type="text" value="25"/> <input type="text" value="2010"/></p>
<p>City Des Moines State IA Zip Code 50309</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Wireless Internet Candidate Name</p>	<p><input type="text" value="238.50"/></p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

B. Form/Schedule : **SB17**

Offset against overpayment on 9/3.

Transaction ID : **D147948**

10021012576

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Target	Transaction ID: D147889 Date of Disbursement
Mailing Address 1111 East Army Post Road	<div> <div>MM</div> <div>DD</div> <div>YY</div> <div>YY</div> <div>YY</div> <div>YY</div> </div> <div>10</div> <div>25</div> <div>2010</div>
City Des Moines State IA Zip Code 50315	Amount of Each Disbursement this Period
Purpose of Disbursement Office Supplies Candidate Name	<div>48.27</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div>Category/Type</div> [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) The Des Moines Social Club	Transaction ID: D147951 Date of Disbursement
Mailing Address 1408 Locust Street	<div> <div>MM</div> <div>DD</div> <div>YY</div> <div>YY</div> <div>YY</div> <div>YY</div> </div> <div>10</div> <div>25</div> <div>2010</div>
City Des Moines State IA Zip Code 50309	Amount of Each Disbursement this Period
Purpose of Disbursement Room Rental Candidate Name	<div>325.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div>Category/Type</div> [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) The Packaging Store	Transaction ID: D147952 Date of Disbursement
Mailing Address 3200 Ingersoll Ave	<div> <div>MM</div> <div>DD</div> <div>YY</div> <div>YY</div> <div>YY</div> <div>YY</div> </div> <div>10</div> <div>25</div> <div>2010</div>
City Des Moines State IA Zip Code 50312-3917	Amount of Each Disbursement this Period
Purpose of Disbursement Shipping Candidate Name	<div>123.06</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div>Category/Type</div> [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional)	<div>0.00</div>
TOTAL This Period (last page this line number only)	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012577

B. Form/Schedule : **SB17**
Transaction ID : **D147951**

Offset against overpayment on 9/3.

C. Form/Schedule : **SB17**
Transaction ID : **D147952**

Offset against overpayment on 9/3.

10021012578

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) United States Postal Service</p> <p>Mailing Address 1165 Second Avenue</p> <p>City Des Moines State IA Zip Code 50318</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147891</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 555.91</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) United States Postal Service</p> <p>Mailing Address 1165 Second Avenue</p> <p>City Des Moines State IA Zip Code 50318</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147943</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 557.65</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address 777 Big Timber Rd</p> <p>City Elgin State IL Zip Code 60123-1488</p> <p>Purpose of Disbursement Wireless Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147898</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 227.77</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 0.00</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012579

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Mark J. Daley</p> <p>Mailing Address 13303 Rocklyn Dr</p> <p>City Urbandale State IA Zip Code 50323</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146722</p> <p>Date of Disbursement MM / DD / YYYY 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 4991.99</p>
<p>B. Full Name (Last, First, Middle Initial) Facebook</p> <p>Mailing Address 1601 S. California Avenue</p> <p>City Palo Alto State CA Zip Code 94304</p> <p>Purpose of Disbursement Web Ads</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147497</p> <p>Date of Disbursement MM / DD / YYYY 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 4991.99</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Sonni Giudicessi</p> <p>Mailing Address 2508 33rd St</p> <p>City Des Moines State IA Zip Code 50310-5105</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146723</p> <p>Date of Disbursement MM / DD / YYYY 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 180.40</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 5172.39</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

10021012580

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

Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) HyVee</p> <p>Mailing Address 1725 Jordan Creek Parkway</p> <p>City West Des Moines State IA Zip Code 50266</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147496</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 15.08</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Office Max</p> <p>Mailing Address 2700 Ingersoll Ave</p> <p>City Des Moines State IA Zip Code 50312-5240</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147495</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 165.32</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Jennifer Fiihr</p> <p>Mailing Address 4110 Forest Ave</p> <p>City Des Moines State IA Zip Code 50311-2539</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146729</p> <p>Date of Disbursement 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 102.07</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 102.07</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012581

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) IdentityPI.com</p>	<p>Transaction ID: D147689 Date of Disbursement</p>
<p>Mailing Address 8730 Wilshire Blvd. Suite 412</p>	<p><input type="text"/> / <input type="text"/> / <input type="text"/></p>
<p>City Beverly Hills State CA Zip Code 90211</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Employment Verification</p>	<p><input type="text"/> 30.00</p>
<p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Mark J. Daley</p>	<p>Transaction ID: D146731 Date of Disbursement</p>
<p>Mailing Address 13303 Rocklyn Dr</p>	<p><input type="text"/> / <input type="text"/> / <input type="text"/></p>
<p>City Urbandale State IA Zip Code 50323</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Reimbursement</p>	<p><input type="text"/> 5486.94</p>
<p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	
<p>C. Full Name (Last, First, Middle Initial) Facebook</p>	<p>Transaction ID: D147687 Date of Disbursement</p>
<p>Mailing Address 1601 S. California Avenue</p>	<p><input type="text"/> / <input type="text"/> / <input type="text"/></p>
<p>City Palo Alto State CA Zip Code 94304</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Web Ads</p>	<p><input type="text"/> 5486.94</p>
<p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text"/> 5486.94</p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012582

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Sara Kanawati</p> <p>Mailing Address 300 E Grand Ave Apt 503</p> <p>City Des Moines State IA Zip Code 50309-1843</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146734</p> <p>Date of Disbursement MM / DD / YYYY 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 114.92</p>
<p>B. Full Name (Last, First, Middle Initial) Costco</p> <p>Mailing Address 7205 Mills Civic Parkway</p> <p>City West Des Moines State IA Zip Code 50266</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147701</p> <p>Date of Disbursement MM / DD / YYYY 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 100.64</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Office Max</p> <p>Mailing Address 2700 Ingersoll Ave</p> <p>City Des Moines State IA Zip Code 50312-5240</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147700</p> <p>Date of Disbursement MM / DD / YYYY 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 14.28</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► 114.92</p> <p>TOTAL This Period (last page this line number only) ►</p>	

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Sonni Giudicessi</p> <p>Mailing Address 2508 33rd St</p> <p>City Des Moines State IA Zip Code 50310-5105</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146737</p> <p>Date of Disbursement MM / DD / YYYY 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 72.07</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Office Max</p> <p>Mailing Address 2700 Ingersoll Ave</p> <p>City Des Moines State IA Zip Code 50312-5240</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147688</p> <p>Date of Disbursement MM / DD / YYYY 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 72.07</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Sonni Giudicessi</p> <p>Mailing Address 2508 33rd St</p> <p>City Des Moines State IA Zip Code 50310-5105</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146738</p> <p>Date of Disbursement MM / DD / YYYY 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 108.06</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 180.13</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address PO Box 6438</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Cell</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147691</p> <p>Date of Disbursement MM / DD / YYYY 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 108.06</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mark J. Daley</p> <p>Mailing Address 13303 Rocklyn Dr</p> <p>City Urbandale State IA Zip Code 50323</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146739</p> <p>Date of Disbursement MM / DD / YYYY 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 1465.86</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Facebook</p> <p>Mailing Address 1601 S. California Avenue</p> <p>City Palo Alto State CA Zip Code 94304</p> <p>Purpose of Disbursement Web Ads</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147686</p> <p>Date of Disbursement MM / DD / YYYY 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 1465.86</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► 1465.86</p> <p>TOTAL This Period (last page this line number only) ►</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012585

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

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Christopher McClure	Transaction ID: D146742 Date of Disbursement
Mailing Address 2309 Park Ln	<div> <div>MM</div> <div>DD</div> <div>YY</div> <div>YY</div> <div>YY</div> <div>YY</div> </div> <div>11 / 02 / 2010</div>
City West Des Moines State IA Zip Code 50265-4856	Amount of Each Disbursement this Period
Purpose of Disbursement Reimbursement Candidate Name	<div>404.82</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) Bloomer's	Transaction ID: D147676 Date of Disbursement
Mailing Address 1235 Plaza Drive	<div> <div>MM</div> <div>DD</div> <div>YY</div> <div>YY</div> <div>YY</div> <div>YY</div> </div> <div>11 / 02 / 2010</div>
City Carroll State IA Zip Code 51401	Amount of Each Disbursement this Period
Purpose of Disbursement Meals Candidate Name	<div>29.94</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
C. Full Name (Last, First, Middle Initial) Hamburg Inn	Transaction ID: D147674 Date of Disbursement
Mailing Address 214 N. Linn	<div> <div>MM</div> <div>DD</div> <div>YY</div> <div>YY</div> <div>YY</div> <div>YY</div> </div> <div>11 / 02 / 2010</div>
City Iowa City State IA Zip Code 52245	Amount of Each Disbursement this Period
Purpose of Disbursement Meals Candidate Name	<div>26.89</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
SUBTOTAL of Disbursements This Page (optional) ▶	
TOTAL This Period (last page this line number only) ▶	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012586

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

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) J & M Corner Shop</p> <p>Mailing Address Highway 103</p> <p>City West Point State IA Zip Code 52656</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147677</p> <p>Date of Disbursement MM / DD / YYYY 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 30.53</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Kempker's True Value</p> <p>Mailing Address 1904 Avenue H</p> <p>City Fort Madison State IA Zip Code 52627</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147678</p> <p>Date of Disbursement MM / DD / YYYY 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 5.13</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Kum and Go</p> <p>Mailing Address 6400 Westown Parkway</p> <p>City West Des Moines State IA Zip Code 50266</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147675</p> <p>Date of Disbursement MM / DD / YYYY 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 68.64</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 0.00</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

10021012587

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

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mister Car Wash</p> <p>Mailing Address 2525 Ingersoll Avenue</p> <p>City Des Moines State IA Zip Code 50312</p> <p>Purpose of Disbursement Car Wash</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147671</p> <p>Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 13.96</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Salsa, Inc.</p> <p>Mailing Address 1081 Main Street</p> <p>City Dubuque State IA Zip Code 52001</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147679</p> <p>Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 29.93</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Sprint</p> <p>Mailing Address 6391 Sprint Parkway</p> <p>City Overland Park State KS Zip Code 66251</p> <p>Purpose of Disbursement Cell</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147681</p> <p>Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 0.00</p>	
<p>TOTAL This Period (last page this line number only) ▶</p>	

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) West Des Moines Community Schools</p> <p>Mailing Address 3550 Mills Civic Parkway</p> <p>City West Des Moines State IA Zip Code 50265</p> <p>Purpose of Disbursement Health Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147682</p> <p>Date of Disbursement MM / DD / YYYY 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 174.80</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Jordan Homer</p> <p>Mailing Address 4720 Mortensen Road #303</p> <p>City Ames State IA Zip Code 50014</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146749</p> <p>Date of Disbursement MM / DD / YYYY 11 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address PO Box 6438</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Cell</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147695</p> <p>Date of Disbursement MM / DD / YYYY 11 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

50.00

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

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

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mark J. Daley</p> <p>Mailing Address 13303 Rocklyn Dr</p> <p>City Urbandale State IA Zip Code 50323</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146751</p> <p>Date of Disbursement MM / DD / YYYY 11 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 698.53</p> <p>Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Facebook</p> <p>Mailing Address 1601 S. California Avenue</p> <p>City Palo Alto State CA Zip Code 94304</p> <p>Purpose of Disbursement Web Ads</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147685</p> <p>Date of Disbursement MM / DD / YYYY 11 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 698.53</p> <p>[MEMO ITEM]</p> <p>Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Sonni Giudicessi</p> <p>Mailing Address 2508 33rd St</p> <p>City Des Moines State IA Zip Code 50310-5105</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146752</p> <p>Date of Disbursement MM / DD / YYYY 11 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 220.00</p> <p>Category/ Type</p>
<p>SUBTOTAL of Disbursements This Page (optional) 918.53</p> <p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) HyVee</p> <p>Mailing Address 1725 Jordan Creek Parkway</p> <p>City West Des Moines State IA Zip Code 50266</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147694</p> <p>Date of Disbursement MM / DD / YYYY 11 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 220.00</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Sara Kanawati</p> <p>Mailing Address 300 E Grand Ave Apt 503</p> <p>City Des Moines State IA Zip Code 50309-1843</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146753</p> <p>Date of Disbursement MM / DD / YYYY 11 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p>
<p>C. Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address PO Box 6438</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Cell</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147702</p> <p>Date of Disbursement MM / DD / YYYY 11 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) 50.00</p> <p>TOTAL This Period (last page this line number only)</p>	

FESAN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012591

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Sonni Giudicessi</p> <p>Mailing Address 2508 33rd St</p> <p>City Des Moines State IA Zip Code 50310-5105</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146785</p> <p>Date of Disbursement MM / DD / YYYY 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 240.06</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address PO Box 6438</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Cell</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147692</p> <p>Date of Disbursement MM / DD / YYYY 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 108.06</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) United States Postal Service</p> <p>Mailing Address 1165 Second Avenue</p> <p>City Des Moines State IA Zip Code 50318</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147693</p> <p>Date of Disbursement MM / DD / YYYY 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 132.00</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 240.06</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Christopher McClure</p>	<p>Transaction ID: D146787 Date of Disbursement</p>
<p>Mailing Address 2309 Park Ln</p>	<p>MM / DD / YYYY 11 / 22 / 2010</p>
<p>City State Zip Code West Des Moines IA 50265-4856</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p>	<p>369.60</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Davis Brown Tower</p>	<p>Transaction ID: D147684 Date of Disbursement</p>
<p>Mailing Address 215 10th Street</p>	<p>MM / DD / YYYY 11 / 22 / 2010</p>
<p>City State Zip Code Des Moines IA 50309</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Parking</p> <p>Candidate Name</p>	<p>20.00</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) West Des Moines Community Schools</p>	<p>Transaction ID: D147683 Date of Disbursement</p>
<p>Mailing Address 3550 Mills Civic Parkway</p>	<p>MM / DD / YYYY 11 / 22 / 2010</p>
<p>City State Zip Code West Des Moines IA 50265</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Health Insurance</p> <p>Candidate Name</p>	<p>349.60</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>369.60</p>
<p>TOTAL This Period (last page this line number only)</p>	

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Bancard Services	Transaction ID: D146789 Date of Disbursement <div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>11</div> <div>22</div> <div>2010</div>
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FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012594

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address 777 Big Timber Rd</p> <p>City Elgin State IL Zip Code 60123-1488</p> <p>Purpose of Disbursement Cell</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147690</p> <p>Date of Disbursement 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 110.00</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Bancard Services</p> <p>Mailing Address PO Box 3038</p> <p>City Evansville State IN Zip Code 47730</p> <p>Purpose of Disbursement Credit Card Payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146801</p> <p>Date of Disbursement 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 782.44</p>
<p>C. Full Name (Last, First, Middle Initial) Casey's</p> <p>Mailing Address One SE Convenience Blvd.</p> <p>City Ankeny State IA Zip Code 50021</p> <p>Purpose of Disbursement Beverages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147966</p> <p>Date of Disbursement 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 1.59</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

782.44

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A. Full Name (Last, First, Middle Initial) Garner Printing</p> <p>Mailing Address 1657 NE 53rd Ave</p> <p>City Des Moines State IA Zip Code 50313-2128</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147960</p> <p>Date of Disbursement MM / DD / YYYY 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 434.60</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Kum and Go</p> <p>Mailing Address 6400 Westown Parkway</p> <p>City West Des Moines State IA Zip Code 50266</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147965</p> <p>Date of Disbursement MM / DD / YYYY 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 45.10</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) La Casa</p> <p>Mailing Address 508 North Jefferson Way</p> <p>City Indianola State IA Zip Code 50125</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147957</p> <p>Date of Disbursement MM / DD / YYYY 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 17.65</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

10021012596

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

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NAME OF COMMITTEE (In Full)

Roxanne Corlin for Senate

A.

Full Name (Last, First, Middle Initial)

Robodial.org

Mailing Address PO Box 1393

City
Media

State
PA

Zip Code
19063

Purpose of Disbursement
Auto Calls

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D147959

Date of Disbursement

11 / 22 / 2010

Amount of Each Disbursement this Period

281.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Daniel McClung

Mailing Address 7614 Camelot Dr
Apt 357

City
Urbandale

State
IA

Zip Code
50322-4557

Purpose of Disbursement
Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D146804

Date of Disbursement

10 / 22 / 2010

Amount of Each Disbursement this Period

122.57

C.

Full Name (Last, First, Middle Initial)

Pilot

Mailing Address 4126 Highway 21

City
Brooklyn

State
IA

Zip Code
52211

Purpose of Disbursement
Gas

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D147499

Date of Disbursement

10 / 22 / 2010

Amount of Each Disbursement this Period

39.58

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

122.57

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A. Full Name (Last, First, Middle Initial) Sprint	Transaction ID: D147500 Date of Disbursement
Mailing Address 6391 Sprint Parkway	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>10 / 22 / 2010</div>
City Overland Park State KS Zip Code 66251	Amount of Each Disbursement this Period
Purpose of Disbursement Cell Candidate Name	<div> <div>Amount</div> <div>72.29</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>
B. Full Name (Last, First, Middle Initial) United States Postal Service	Transaction ID: D147498 Date of Disbursement
Mailing Address 1165 Second Avenue	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>10 / 22 / 2010</div>
City Des Moines State IA Zip Code 50318	Amount of Each Disbursement this Period
Purpose of Disbursement Postage Candidate Name	<div> <div>Amount</div> <div>10.70</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>
C. Full Name (Last, First, Middle Initial) Daniel McClung	Transaction ID: D146805 Date of Disbursement
Mailing Address 7614 Camelot Dr Apt 357	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>11 / 02 / 2010</div>
City Urbandale State IA Zip Code 50322-4557	Amount of Each Disbursement this Period
Purpose of Disbursement Reimbursement Candidate Name	<div> <div>Amount</div> <div>128.61</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<div> <div>Category/Type</div> </div>
SUBTOTAL of Disbursements This Page (optional)	<div> <div>Amount</div> <div>128.61</div> </div>
TOTAL This Period (last page this line number only)	<div> <div>Amount</div> </div>

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

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

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Go America</p> <p>Mailing Address 5350 31st Avenue</p> <p>City Urbana State IA Zip Code 52345</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147697</p> <p>Date of Disbursement MM / DD / YYYY 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 31.24</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Sprint</p> <p>Mailing Address 6391 Sprint Parkway</p> <p>City Overland Park State KS Zip Code 66251</p> <p>Purpose of Disbursement Cell</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147699</p> <p>Date of Disbursement MM / DD / YYYY 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 72.29</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) True Value</p> <p>Mailing Address 100 Grand Avenue</p> <p>City West Des Moines State IA Zip Code 50265</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D147696</p> <p>Date of Disbursement MM / DD / YYYY 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 5.08</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► 0.00</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10021012599

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

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

Full Name (Last, First, Middle Initial)

Valley Oil Company

Transaction ID: D147698

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2010

Mailing Address US 71 and I80

City
Atlantic

State
IA

Zip Code
50022

Amount of Each Disbursement this Period

20.00

Purpose of Disbursement

Gas

Category/
Type

Candidate Name

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For: 2010

☐ Primary

☒ General

☐ Other (specify) ▼

State:

District:

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

443302.40

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

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

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Roxanne Conlin

Transaction ID: D148222

Date of Disbursement

Mailing Address PO Box 876

MM / DD / YYYY
11 / 22 / 2010

City
Des Moines

State
IA

Zip Code
50304-0876

Amount of Each Disbursement this Period

500000.00

Purpose of Disbursement
Loan forgiveness by Candidate

Candidate Name
Roxanne Conlin

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

State: IA

District:

[MEMO ITEM]

See Schedule A Line 11d

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

0.00

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

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

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)

Paulee Lipsman

Transaction ID: D146784

Date of Disbursement

Mailing Address 2880 Grand Ave
Apt 106

MM / DD / YYYY
11 / 22 / 2010

City State Zip Code
Des Moines IA 50312-4273

Amount of Each Disbursement this Period

Purpose of Disbursement
Refund

50.00

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

50.00

TOTAL This Period (last page this line number only)

50.00

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

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

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NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

A.

Full Name (Last, First, Middle Initial)
Iowa Democratic Party

Mailing Address 5661 Fleur Dr

City State Zip Code
Des Moines IA 50321-2841

Purpose of Disbursement
Transfer

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D146724

Date of Disbursement

10 / 27 / 2010

Amount of Each Disbursement this Period

12000.00

B.

Full Name (Last, First, Middle Initial)
Iowa Democratic Party

Mailing Address 5661 Fleur Dr

City State Zip Code
Des Moines IA 50321-2841

Purpose of Disbursement
Transfer

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D146720

Date of Disbursement

10 / 25 / 2010

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional) ►

12100.00

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

12100.00

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 171 / 175

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

Transaction ID: L313

LOAN SOURCE Full Name (Last, First, Middle Initial)
Roxanne Conlin, PERS FUNDS - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address PO Box 876

City Des Moines State IA ZIP Code 50304-0876

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250000.00	0.00	250000.00

TERMS

Date Incurred: MM DD YYYY 03 30 2010 Date Due: 12/31/2010 Interest Rate: .0000 % (apr) Secured: ☐ Yes ☒ No

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

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

250000.00

TOTALS This Period (last page in this line only) ▶

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 3)

LOANS

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

PAGE 172 / 175

FOR LINE NUMBER:
(check only one)

☐ 13a
☒ 13b

NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

Transaction ID: L320

LOAN SOURCE Full Name (Last, First, Middle Initial)
Roxanne Conlin, PERS FUNDS - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address PO Box 876

City Des Moines State IA ZIP Code 50304-0876

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

TERMS

Date Incurred M D Y 01 13 2010 Date Due 12/31/2010 Interest Rate .0000 % (apr) Secured: ☐ Yes ☒ No

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

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

0.00

TOTALS This Period (last page in this line only) ▶

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

A. Form/Schedule : **SC/10**
Transaction ID : **L320**

The candidate obtained a letter of credit from West Bank to Qwest and personally guaranteed the telephone bills in lieu of paying a deposit.

10021012606

SCHEDULE C (FEC Form 3)

LOANS

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

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FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Roxanne Conlin for Senate

Transaction ID: L424

LOAN SOURCE Full Name (Last, First, Middle Initial)
Roxanne Conlin, PERS FUNDS - [PERSONAL FUNDS]

Election:

☐ Primary
☒ General
☐ Other (specify) ▼

Mailing Address PO Box 876

City Des Moines State IA ZIP Code 50304-0876

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250000.00	0.00	250000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM DD YYYY 06 29 2010	12/31/2010	.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

250000.00

TOTALS This Period (last page in this line only) ▶

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 3)

LOANS

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

PAGE 175 / 175

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Roxanne Conlin for Senate

Transaction ID: L504

LOAN SOURCE Full Name (Last, First, Middle Initial)
Roxanne Conlin

Election:

☐ Primary
☒ General
☐ Other (specify) ▼

Mailing Address PO Box 876

City Des Moines State IA ZIP Code 50304-0876

Original Amount of Loan

500000.00

Cumulative Payment To Date

500000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM
09

DD
23

YYYY
2010

12/31/2010

.0000 % (apr)

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

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) ▶

0.00

TOTALS This Period (last page in this line only) ▶

500000.00

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

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED

12-02-10

Date of Receipt

USPS FIRST CLASS MAIL

Postmark

USPS REGISTERED/CERTIFIED

Postmark

USPS PRIORITY MAIL

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS

☐

UPS

☐

DHL

☐

AIRBORNE EXPRESS

☐

RECEIVED FROM FEDERAL ELECTION COMMISSION

Date of Receipt

POSTMARK ILLEGIBLE ☐

NO POSTMARK ☐

FAX

Date of Receipt

OTHER

Date of Receipt or Postmark

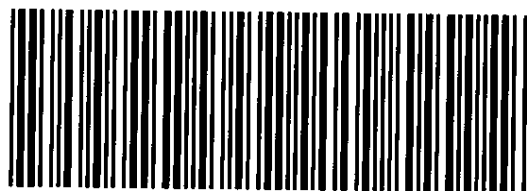
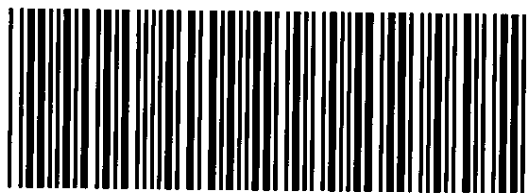
PREPARER

RD

DATE PREPARED

12-02-10

10021012609



10021012610