

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 1123 Broadway  
Suite 700  
 Check if different than previously reported. (ACC)  
New York NY 10010

2. **FEC IDENTIFICATION NUMBER** C00425694  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2007 through 03 31 2007

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 Malea Stenzel

Signature of Treasurer Electronically Filed by Malea Stenzel Date 04 10 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
IA Vets for Congress

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">141.90</td></tr></table>	141.90
Y	Y	Y	Y									
2	0	0	7									
141.90												
(b) Cash on Hand at Beginning of Reporting Period .....	<table border="1" style="width: 100%;"><tr><td align="right">141.90</td></tr></table>	141.90										
141.90												
(c) Total Receipts (from Line 19) .....	<table border="1" style="width: 100%;"><tr><td align="right">23725.00</td></tr></table>	23725.00	<table border="1" style="width: 100%;"><tr><td align="right">23725.00</td></tr></table>	23725.00								
23725.00												
23725.00												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<table border="1" style="width: 100%;"><tr><td align="right">23866.90</td></tr></table>	23866.90	<table border="1" style="width: 100%;"><tr><td align="right">23866.90</td></tr></table>	23866.90								
23866.90												
23866.90												
7. Total Disbursements (from Line 31) .....	<table border="1" style="width: 100%;"><tr><td align="right">2523.60</td></tr></table>	2523.60	<table border="1" style="width: 100%;"><tr><td align="right">2523.60</td></tr></table>	2523.60								
2523.60												
2523.60												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table border="1" style="width: 100%;"><tr><td align="right">21343.30</td></tr></table>	21343.30	<table border="1" style="width: 100%;"><tr><td align="right">21343.30</td></tr></table>	21343.30								
21343.30												
21343.30												
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
IA Vets for Congress

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	21200.00	21200.00
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	21200.00	21200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	21200.00	21200.00
12. Transfers From Affiliated/Other Party Committees .....	2525.00	2525.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	23725.00	23725.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	23725.00	23725.00

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	2523.60	2523.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	2523.60	2523.60
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2523.60	2523.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	2523.60	2523.60

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	21200.00	21200.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	21200.00	21200.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2523.60	2523.60
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2523.60	2523.60

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 10
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
IA Vets for Congress

Full Name (Last, First, Middle Initial) <b>A.</b> Kapil Mathur		Date of Receipt M M / D D / Y Y Y Y Y 03 / 28 / 2007
Mailing Address 142 West End Avenue		<b>Transaction ID:</b> SA11A1.4391
City State Zip Code New York NY 10023	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer SAC Capital Advisors LLC	Occupation Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Terry Meehan		Date of Receipt M M / D D / Y Y Y Y Y 03 / 28 / 2007
Mailing Address 39 Broadway 36th Floor		<b>Transaction ID:</b> SA11A1.4383
City State Zip Code New York NY 10006	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Azimuth Trust	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Barry Rosenstein		Date of Receipt M M / D D / Y Y Y Y Y 03 / 21 / 2007
Mailing Address 768 El Camino Del Mar		<b>Transaction ID:</b> SA11A1.4384
City State Zip Code San Francisco CA 94121	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Jana Partners	Occupation Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	12000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 10
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
IA Vets for Congress

**A.** Full Name (Last, First, Middle Initial)  
Julian Schroeder

Mailing Address 215 West 92nd Street

City State Zip Code  
New York NY 10025

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

Name of Employer Credit Renaissance Partners  
Occupation Investment Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4600.00

Date of Receipt  
MM / DD / YYYY  
03 / 23 / 2007

Transaction ID: SA11A1.4386

Amount of Each Receipt this Period  
4600.00

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

Mailing Address 215 West 92nd Street

City State Zip Code  
New York NY 10025

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

Name of Employer NYC Board of Education  
Occupation Staff Developer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4600.00

Date of Receipt  
MM / DD / YYYY  
03 / 23 / 2007

Transaction ID: SA11A1.4388

Amount of Each Receipt this Period  
4600.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	9200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	21200.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 10
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
IA Vets for Congress

Full Name (Last, First, Middle Initial) <b>A.</b> VoteVets PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 1 / 2 0 0 7
Mailing Address 90 Park Avenue 17th Floor		<b>Transaction ID:</b> SA12.4408
City State Zip Code NEW YORK NY 10016	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00418897	Transfer from Affiliated Committee	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> VoteVets PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 2 / 2 0 0 7
Mailing Address 90 Park Avenue 17th Floor		<b>Transaction ID:</b> SA12.4382
City State Zip Code NEW YORK NY 10016	Amount of Each Receipt this Period 2025.00	
FEC ID number of contributing federal political committee. <b>C</b> C00418897	Transfer from Affiliated Committee	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2525.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2525.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	2525.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 10

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

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NAME OF COMMITTEE (In Full)  
IA Vets for Congress

**A.** Federal Election Commission

Full Name (Last, First, Middle Initial)  
Mailing Address 999 E Street NW

City Washington State DC Zip Code 20463

Purpose of Disbursement  
Payment of Fine  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**Transaction ID:** SB21B.4395  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

**B.** Political C.F.O.s., Inc.

Full Name (Last, First, Middle Initial)  
Mailing Address 201 King Street, Suite 200

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Accounting/Compliance Services  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**Transaction ID:** SB21B.4410  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

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

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

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
IA Vets for Congress

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Political C.F.O.s., Inc.

Mailing Address 201 King Street, Suite 200

City State ZIP Code  
Alexandria VA 22314

Nature of Debt (Purpose):  
Compliance Consulting Fee

Outstanding Balance Beginning This Period

191.25
--------

Transaction ID: SD10.4374

Amount Incurred This Period

0.00
------

Payment This Period

191.25
--------

Outstanding Balance at Close of This Period

0.00
------

1) <b>SUBTOTALS</b> This Period This Page (optional).....	0.00
2) <b>TOTALS</b> This Period (last page this line number only).....	0.00
3) <b>TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2)</b> and 3) and carry forward to appropriate line of Summary Page (last page only)	