

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 American Heartland PAC

ADDRESS (number and street) 801 Pennsylvania Ave. NW Suite 610 Washington DC 20004 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00548867 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special. Election on 11/04/2014 in the State of IA

5. Covering Period 10/01/2014 through 11/24/2014

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 Michael G. Adams

Signature of Treasurer Michael G. Adams [Electronically Filed] Date 12/04/2014

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Heartland PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="546316.49"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="75205.00"/>	<input type="text" value="978205.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="621521.49"/>	<input type="text" value="978205.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="602155.09"/>	<input type="text" value="958838.60"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="19366.40"/>	<input type="text" value="19366.40"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

American Heartland PAC

Report Covering the Period: From: 10 / 01 / 2014 To: 11 / 24 / 2014

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	75200.00	973200.00
(ii) Unitemized	5.00	5.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)..... ▶	75205.00	973205.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	75205.00	978205.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	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 Transfers (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))..... ▶	75205.00	978205.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	75205.00	978205.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	131155.09	241336.10
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	131155.09	241336.10
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	471000.00	717502.50
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	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) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	602155.09	958838.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	602155.09	958838.60

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	75205.00	978205.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	75205.00	978205.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	131155.09	241336.10
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	131155.09	241336.10

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

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

FOR LINE NUMBER: PAGE 6 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
American Heartland PAC

A. Holloway Frost
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 667
 City Houston State TX Zip Code 77001
 Date of Receipt: 10 / 08 / 2014
 Transaction ID : SA11AI.4215
 Amount of Each Receipt this Period: 5200.00
 Aggregate Year-to-Date: 5200.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: None Occupation: Retired
 Receipt For: Primary General Other (specify) ▼

B. Martin Gross
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 Eisenhower Pkwy.
 City Roseland State NJ Zip Code 07068
 Date of Receipt: 10 / 24 / 2014
 Transaction ID : SA11AI.4221
 Amount of Each Receipt this Period: 2500.00
 Aggregate Year-to-Date: 2500.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: Sandalwood Securities, Inc. Occupation: President
 Receipt For: Primary General Other (specify) ▼

C. Michael J. Leffell
 Full Name (Last, First, Middle Initial)
 Mailing Address 35 Sheldrake Rd.
 City Scarsdale State NY Zip Code 10583
 Date of Receipt: 10 / 24 / 2014
 Transaction ID : SA11AI.4219
 Amount of Each Receipt this Period: 10000.00
 Aggregate Year-to-Date: 10000.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: Portage Advisors LLC Occupation: Founder
 Receipt For: Primary General Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶ 17700.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 16
	<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)
American Heartland PAC

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

Mailing Address 270 W. End Ave.
Apt. 8N

City New York State NY Zip Code 10023

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

Name of Employer Blue Mountain Capital Managememe Occupation Managing Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
10 / 30 / 2014
Transaction ID : SA11AI.4223

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
B. Stacy Schusterman Revocable Trust

Mailing Address P.O. Box 699

City Tulsa State OK Zip Code 74101

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
10 / 22 / 2014
Transaction ID : SA11AI.4217

Amount of Each Receipt this Period
50000.00

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

Mailing Address 210 University Blvd
Suite 410

City Denver State CO Zip Code 80206

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
11 / 03 / 2014
Transaction ID : SA11AI.4225

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....▶	57500.00
TOTAL This Period (last page this line number only).....▶	75200.00

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

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

FOR LINE NUMBER:
(check only one)

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

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)
American Heartland PAC

Full Name (Last, First, Middle Initial)

A. Dinsmore & Shohl LLP

Mailing Address 101 S. Fifth St.
Suite 2500

City Louisville State KY Zip Code 40202

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 10 / 2014

Transaction ID : **SB21B.4227**

Amount of Each Disbursement this Period

1937.55

Category/
Type

Full Name (Last, First, Middle Initial)

B. Dinsmore & Shohl LLP

Mailing Address 101 S. Fifth St.
Suite 2500

City Louisville State KY Zip Code 40202

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 24 / 2014

Transaction ID : **SB21B.4235**

Amount of Each Disbursement this Period

4801.45

Category/
Type

Full Name (Last, First, Middle Initial)

C. Madison Morgan Strategies, LLC

Mailing Address 2711 Centerville Rd.
Ste. 120

City Wilmington State DE Zip Code 19808

Purpose of Disbursement
Fundraising Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 28 / 2014

Transaction ID : **SB21B.4233**

Amount of Each Disbursement this Period

62376.00

Category/
Type

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

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

69115.00

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

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

FOR LINE NUMBER:
(check only one)

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

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)
American Heartland PAC

Full Name (Last, First, Middle Initial)

A. Madison Morgan Strategies, LLC

Mailing Address 2711 Centerville Rd.
Ste. 120

City State Zip Code
Wilmington DE 19808

Purpose of Disbursement
Fundraising Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2014			

Transaction ID : **SB21B.4234**

Amount of Each Disbursement this Period

1	7	7	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Red Print Strategy

Mailing Address 311 S. Fillmore St.

City State Zip Code
Arlington VA 22204

Purpose of Disbursement
Media Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2014			

Transaction ID : **SB21B.4177**

Amount of Each Disbursement this Period

3	5	0	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Red Print Strategy

Mailing Address 311 S. Fillmore St.

City State Zip Code
Arlington VA 22204

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2014			

Transaction ID : **SB21B.4178**

Amount of Each Disbursement this Period

2	5	0	0	0	0
---	---	---	---	---	---

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

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

6	1	7	7	0	0
---	---	---	---	---	---

1	3	0	8	8	5	0	0
---	---	---	---	---	---	---	---

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Heartland PAC
FEC IDENTIFICATION NUMBER C C00548867
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Red Print Strategy
Mailing Address 311 S. Fillmore St.
City Arlington State VA Zip Code 22204
Purpose of Expenditure Creative Commission Category/Type 004
Name of Federal Candidate BRUCE L BRALEY Support Oppose
Calendar Year-To-Date Per Election for Office Sought 137500.00

Date of Public Distribution/Dissemination 10 / 19 / 2014
Amount 12500.00
Transaction ID : SE.4195
Date of Disbursement or Obligation 10 / 16 / 2014
Office Sought: House District: 00
Senate State: IA
Disbursement For: Primary General 2014 Other (specify)

Full Name of Payee Red Print Strategy
Mailing Address 311 S. Fillmore St.
City Arlington State VA Zip Code 22204
Purpose of Expenditure Media Production Category/Type 004
Name of Federal Candidate JONI K ERNST Support Oppose
Calendar Year-To-Date Per Election for Office Sought 254750.00

Date of Public Distribution/Dissemination 10 / 19 / 2014
Amount 11000.00
Transaction ID : SE.4175
Date of Disbursement or Obligation 10 / 17 / 2014
Office Sought: House District: 00
Senate State: IA
Disbursement For: Primary General 2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 23500.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Michael G. Adams [Electronically Filed] Date 12 / 04 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Heartland PAC
FEC IDENTIFICATION NUMBER C C00548867
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Red Print Strategy
Mailing Address 311 S. Fillmore St.
City Arlington State VA Zip Code 22204
Purpose of Expenditure Media Production Category/Type 004
Name of Federal Candidate BRUCE L BRALEY Support Oppose
Calendar Year-To-Date Per Election for Office Sought 348750.00

Date of Public Distribution/Dissemination 10/19/2014
Amount 11000.00
Transaction ID : SE.4196
Date of Disbursement or Obligation 10/17/2014
Office Sought: House Senate State: IA
Disbursement For: Primary General 2014 Other (specify)

Full Name of Payee Red Print Strategy
Mailing Address 311 S. Fillmore St.
City Arlington State VA Zip Code 22204
Purpose of Expenditure Creative Commission Category/Type 004
Name of Federal Candidate BRUCE L BRALEY Support Oppose
Calendar Year-To-Date Per Election for Office Sought 448750.00

Date of Public Distribution/Dissemination 10/28/2014
Amount 10000.00
Transaction ID : SE.4210
Date of Disbursement or Obligation 10/27/2014
Office Sought: House Senate State: IA
Disbursement For: Primary General 2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 21000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Michael G. Adams [Electronically Filed] Date 12/04/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Heartland PAC	FEC IDENTIFICATION NUMBER ▼ C C00548867
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Red Print Strategy	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 28 / 2014
Mailing Address 311 S. Fillmore St.	Amount 16000.00
City State Zip Code Arlington VA 22204	Transaction ID : SE.4238 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 30 / 2014
Purpose of Expenditure Media Production	Category/Type 004
Name of Federal Candidate BRUCE L BRALEY	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 464750.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Strategic Media Placement Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2014
Mailing Address 7669 Stagers Loop	Amount 106250.00
City State Zip Code Delaware OH 43015	Transaction ID : SE.4172 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 16 / 2014
Purpose of Expenditure TV Media Buy	Category/Type 004
Name of Federal Candidate JONI K ERNST	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 106250.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	122250.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael G. Adams [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
12 / 04 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Heartland PAC		FEC IDENTIFICATION NUMBER C C00548867
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Strategic Media Placement Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2014
Mailing Address 7669 Stagers Loop		Amount 6250.00
City Delaware	State OH	Zip Code 43015
Purpose of Expenditure Media Buy Commission	Category/Type 004	Transaction ID : SE.4173 Date of Disbursement or Obligation MM / DD / YYYY 10 / 16 / 2014
Name of Federal Candidate JONI K ERNST	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	112500.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Strategic Media Placement Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2014
Mailing Address 7669 Stagers Loop		Amount 6250.00
City Delaware	State OH	Zip Code 43015
Purpose of Expenditure Media Buy Commission	Category/Type 004	Transaction ID : SE.4197 Date of Disbursement or Obligation MM / DD / YYYY 10 / 16 / 2014
Name of Federal Candidate BRUCE L BRALEY	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 20 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	6250.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	12500.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Michael G. Adams [Electronically Filed] Date **12 / 04 / 2014**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Heartland PAC	FEC IDENTIFICATION NUMBER ▼ C C00548867
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Strategic Media Placement Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2014	
Mailing Address 7669 Stagers Loop		Amount 106250.00	
City Delaware	State OH	Zip Code 43015	Transaction ID : SE.4198
Purpose of Expenditure TV Media Buy	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 16 / 2014	
Name of Federal Candidate BRUCE L BRALEY		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

243750.00

Full Name of Payee Strategic Media Placement Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 7669 Stagers Loop		Amount 85000.00	
City Delaware	State OH	Zip Code 43015	Transaction ID : SE.4208
Purpose of Expenditure TV Media Buy	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 27 / 2014	
Name of Federal Candidate BRUCE L BRALEY		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

433750.00

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	191250.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael G. Adams

[Electronically Filed]

Date MM / DD / YYYY
12 / 04 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Heartland PAC	FEC IDENTIFICATION NUMBER ▼ C C00548867
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Strategic Media Placement Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 28 / 2014
Mailing Address 7669 Stagers Loop	Amount 5000.00
City State Zip Code Delaware OH 43015	Transaction ID : SE.4209 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 27 / 2014
Purpose of Expenditure Media Buy Commission	Category/Type 004
Name of Federal Candidate BRUCE L BRALEY	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: IA
Calendar Year-To-Date Per Election for Office Sought 438750.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address	Amount
City State Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure	Category/Type
Name of Federal Candidate	<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: State:
Calendar Year-To-Date Per Election for Office Sought 	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	5000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	471000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael G. Adams **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y
12 / 04 / 2014

Signature _____