

BALL, KIRK & HOLM, P.C.

RECEIVED
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2013 JUL 15 11:33 AM
FEC MAIL ROOM
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July 9, 2013

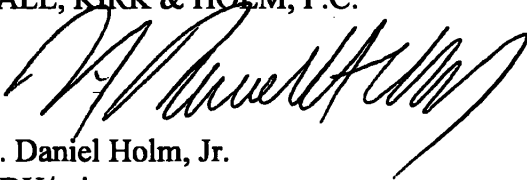
Federal Election Commission
999 East Street NW
Washington, DC 20463

RE: O'Brien for Iowa

To whom it may concern:

Enclosed, please find the "Statement of Organization" for O'Brien for Iowa. If you have any questions, feel free to contact me.

Sincerely,
BALL, KIRK & HOLM, P.C.


H. Daniel Holm, Jr.
HDH/asj

Enclosure

CC: Dave O'Brien via email

13031064852

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED 2013 JUL 15 AM 11:33

Office Use Only

FEC MAIL CENTER

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

O'Brien for Iowa

ADDRESS (number and street)

P.O. Box 11117

(Check if address is changed)

Cedar Rapids

IA

52410

1117

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

compliance@obrienforiowa.com

(Check if address is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

http://obrienforiowa.com

(Check if address is changed)

2. DATE

07 / 03 / 2013

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

Checked box

NEW (N)

OR

Unchecked box

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

H. Daniel Holm, Jr.

Type or Print Name of Treasurer

Signature of Treasurer

Handwritten signature of H. Daniel Holm, Jr.

Date

07 / 03 / 2013

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

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 02/2009)

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5. TYPE OF COMMITTEE

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate David A. O'Brien

Candidate Party Affiliation Dem Office Sought: House Senate President State IA District 01

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative
 - In addition, this committee is a Lobbyist/Registrant PAC.
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C _____
2. _____ FEC ID number C _____
3. _____ FEC ID number C _____
4. _____ FEC ID number C _____

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Write or Type Committee Name

O'Brien for Iowa

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

[Empty dotted lines for organization name]

Mailing Address

[Empty dotted lines for mailing address]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name H. Daniel Holm, Jr.

Mailing Address 3324 Kimball Avenue
P.O. Box 2696
Waterloo IA 50704

Title or Position CITY STATE ZIP CODE

Treasurer

Telephone number 319 234 2638

8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer H. Daniel Holm, Jr.

Mailing Address 3324 Kimball Avenue
P.O. Box 2696
Waterloo IA 50704

Title or Position CITY STATE ZIP CODE

Treasurer

Telephone number 319 234 2638

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Full Name of Designated Agent

[Empty dotted line for name]

Mailing Address

[Empty dotted line for address]

[Empty dotted line for address]

[Empty dotted line for address]

CITY

STATE

ZIP CODE

Title or Position

[Empty dotted line for title]

Telephone number

[Empty dotted line for phone number]

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Veridian Credit Union

[Empty dotted line for bank name]

Mailing Address

2810 Edgewood Road SW

[Empty dotted line for address]

[Empty dotted line for address]

Cedar Rapids

IA

52404

[Empty dotted line for address]

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty dotted line for bank name]

Mailing Address

[Empty dotted line for address]

[Empty dotted line for address]

[Empty dotted line for address]


CITY

STATE

ZIP CODE

13031084856

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 7/9/13
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER (7/2013)	7/15/13 DATE PREPARED

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