

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Braley for Congress

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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)).....	132647.47	227094.51
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	4600.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	132647.47	222494.51
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	31436.52	286429.97
(b) Total Offsets to Operating Expenditures (from Line 14).....	1874.06	1874.06
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	29562.46	284555.91
8. Cash on Hand at Close of Reporting Period (from Line 27).....	208583.76	
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).....	0.00	

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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Braley for Congress

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

42717.19

76667.19

(ii) Unitemized.....

1825.01

3295.01

(iii) TOTAL of contributions

44542.20

79962.20

from individuals..... ▶

105.27

132.31

(b) Political Party Committees.....

(c) Other Political Committees (such as PACS).....

88000.00

147000.00

(d) The Candidate.....

0.00

0.00

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

132647.47

227094.51

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

1874.06

1874.06

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

211.19

1033.54

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

134732.72

230002.11

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	31436.52	286429.97
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	4200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	400.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	4600.00
21. OTHER DISBURSEMENTS.....	0.00	29200.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	31436.52	320229.97

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	105287.56
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	134732.72
25. SUBTOTAL (add Line 23 and Line 24).....	240020.28
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	31436.52
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	208583.76

CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)
(Millionaires' Amendment)

Name of Candidate		Candidate ID Number		
Braley Bruce		H6IA01098		
Name of Principal Campaign Committee		Committee ID Number		
Braley for Congress		C C00409441		
Committee Address				
PO Box 390				
City	State	ZIP		
Waterloo	IA	50704		
Report Covering Period (check one) <input checked="" type="checkbox"/> through June 30, or <input type="checkbox"/> through December 31 of the year preceding the year of the general election				
	Primary		General	
1. Gross receipts of authorized committees	213863.83		18563.00	
2. Aggregate amount of contributions from personal funds of the candidate	0.00		0.00	
3. Gross receipts minus the candidate's personal contributions	213863.83		18563.00	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Braley for Congress

A. Full Name (Last, First, Middle Initial)
Thomas L Aller

Mailing Address 1089 Cedar Woods Rd

City State Zip Code
Cedar Rapids IA 52403

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Alliant Energy President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 7

Transaction ID: C4276227

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Bob S. Baizer

Mailing Address 513 Central Ave.
5th Floor

City State Zip Code
Highland Park IL 60035

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Baizer and Kolar, PC Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 0 7

Transaction ID: C4204740

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2500 N Lakeview Avenue #2005

City State Zip Code
Chicago IL 60614

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Espirtu and Associates attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 0 7

Transaction ID: C4204739

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 2500.00

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 7 / 63
(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)
Braley for Congress

A.

Full Name (Last, First, Middle Initial)
E. Drew Britcher

Mailing Address 5 Pondview Road

City State Zip Code
Morris Plains NJ 07950

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

Name of Employer Occupation
Britcher, Leone & Roth, LLC Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 30 / 2007

Transaction ID: C4337690

Amount of Each Receipt this Period
2100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Stewart Casper

Mailing Address 72 Seir Hill Rd

City State Zip Code
Wilton CT 06897

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

Name of Employer Occupation
Casper & de Toledo LLC Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 29 / 2007

Transaction ID: C4337676

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Michael Ciresi

Mailing Address 1247 Culligan Lane

City State Zip Code
Mendota Heights MN 55118

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

Name of Employer Occupation
Robins Kaplan Miller & Ciresi Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 10 / 2007

Transaction ID: C4204725

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5400.00**

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 8 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Braley for Congress

A. Full Name (Last, First, Middle Initial)
Margaret Corboy

Mailing Address 26 Woodley Road

City State Zip Code
Winnetka IL 60093

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
N/A Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 0 7

Transaction ID: C4204737

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Philip H. Corboy, Jr.

Mailing Address 21st Floor
33 N. Dearborn St.

City State Zip Code
Chicago IL 60602

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Corboy and Demetrio, PC Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 0 7

Transaction ID: C4204736

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 5642 E. Presidio Rd.

City State Zip Code
Scottsdale AZ 85254

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Robbins & Curtin, PLLC Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 0 7

Transaction ID: C4337662

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 3000.00

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 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Braley for Congress

A. Full Name (Last, First, Middle Initial)
Lynn G. Cutler
 Mailing Address 1526 N. Mohawk Street
 City State Zip Code
 Chicago IL 60610
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 Holland and Knight LLP Senior Policy
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 7
Transaction ID: C4276207
 Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Paul DiNino
 Mailing Address 700 13th St NW
 City State Zip Code
 Washington DC 20005-3960
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 DiNino & Associates Fund Raising Consultant
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 0 7
Transaction ID: C4284060
 Amount of Each Receipt this Period
300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 * In-Kind: Washington National Baseball Ticket

C. Full Name (Last, First, Middle Initial)
Julie Domenick
 Mailing Address 315 C Street NE
 City State Zip Code
 Washington DC 20002
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 Multiple Strategies LLC President
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 0 7
Transaction ID: C4318478
 Amount of Each Receipt this Period
500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 1800.00

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 10 / 63
(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)
Braley for Congress

A.

Full Name (Last, First, Middle Initial) Thomas J. Duff		Date of Receipt MM / DD / YYYY 06 / 27 / 2007
Mailing Address 2501 35th St		Transaction ID: C4337660
City Des Moines	State IA	Zip Code 50310
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) John Eisberg		Date of Receipt MM / DD / YYYY 06 / 10 / 2007
Mailing Address 401 S. 1st Street Apartment 1413		Transaction ID: C4204726
City Minneapolis	State MN	Zip Code 55401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Robins Kaplan Miller and Ciresi	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Jay Grife		Date of Receipt MM / DD / YYYY 06 / 29 / 2007
Mailing Address 2653 Riverport Drive N		Transaction ID: C4337679
City Jacksonville	State FL	Zip Code 32223
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer The Foot Law Group	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	1500.00
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 12 / 63
(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)
Braley for Congress

A.

Full Name (Last, First, Middle Initial)
James Holland, II

Mailing Address 946 Shipwood Dr.

City Jacksonville State FL Zip Code 32225

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

Name of Employer Wettermark Holland Keith Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 21 / 2007

Transaction ID: C4337647

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Robert Hopper

Mailing Address 2455 City Road 24

City Long Lake State MN Zip Code 55356

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

Name of Employer Zimmerman Reed LLP Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 10 / 2007

Transaction ID: C4204729

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Robert B. Ingram

Mailing Address 4340 Redwood Highway Suite 352

City San Rafael State CA Zip Code 94903

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

Name of Employer Law Offices of Robert Ingram Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 21 / 2007

Transaction ID: C4337646

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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 13 / 63
(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)
Braley for Congress

A.

Full Name (Last, First, Middle Initial) Annie Kaplan		Date of Receipt MM / DD / YYYY 06 / 26 / 2007
Mailing Address 5199 Ten Oaks Rd		Transaction ID: C4284072
City Clarksville	State MD	Zip Code 21029-1013
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Karp, Frosh et al	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Thomas Kayser		Date of Receipt MM / DD / YYYY 06 / 10 / 2007
Mailing Address 2800 LaSalle Plaza 800 LaSalle Ave.		Transaction ID: C4204728
City Minneapolis	State MN	Zip Code 55402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Robins, Kaplan, Miller & Ciresi LLP	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Robert J. King, Jr.		Date of Receipt MM / DD / YYYY 06 / 06 / 2007
Mailing Address 2000 IDS Center 80 S. 8th St., Ste. 2000		Transaction ID: C4201435
City Minneapolis	State MN	Zip Code 55402-2119
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Lommen, Nelson, Cole & Stageberg, P.A.	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 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

FOR LINE NUMBER: PAGE 14 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Braley for Congress

A. Full Name (Last, First, Middle Initial)
Bruce M. Kohen
 Mailing Address 161 N. Clark St., 21st. Fl.
 City Chicago State IL Zip Code 60601-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Anesi, Ozmon, Rodin, Novak & Kohen, Lt Occupation Information Requested
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
 Date of Receipt 06 / 10 / 2007
Transaction ID: C4204738
 Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Patrick A. Malone
 Mailing Address 4901 Esse Ave.
 City Chevy Chase State MD Zip Code 20815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Stein Mitchell & Mezines Occupation Attorney
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Date of Receipt 06 / 26 / 2007
Transaction ID: C4284068
 Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Charles Manatt
 Mailing Address 700 12th Street NW Suite 1100
 City Washington State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Manatt, Phelps, and Phillips, LLP Occupation Attorney
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1167.19
 Date of Receipt 06 / 20 / 2007
Transaction ID: C4276208
 Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2500.00
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 / 63
(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

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)
Braley for Congress

A.

Full Name (Last, First, Middle Initial)
Charles Manatt

Mailing Address 700 12th Street NW
Suite 1100

City Washington State DC Zip Code 20005

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

Name of Employer Manatt, Phelps, and Phillips, LLP Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt 06 / 20 / 2007

Transaction ID: C4276209

Amount of Each Receipt this Period 167.19

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* In-Kind: food

1167.19

B.

Full Name (Last, First, Middle Initial)
Mary Alice McLarty

Mailing Address 6407 Clubhouse Cir

City Dallas State TX Zip Code 75240-5444

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt 06 / 30 / 2007

Transaction ID: C4337688

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

500.00

C.

Full Name (Last, First, Middle Initial)
Chris Messerly

Mailing Address 317 Timberline Trail

City North Oaks State MN Zip Code 55127

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

Name of Employer Robins Kaplan Miller and Ciresi Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt 06 / 10 / 2007

Transaction ID: C4204723

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

500.00

SUBTOTAL of Receipts This Page (optional) ► **1167.19**

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 / 63
(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

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)
Braley for Congress

A.

Full Name (Last, First, Middle Initial)
Mississippi Band of Choctaw Indians

Mailing Address PO Box 6090

City State Zip Code
Choctaw MS 39350

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 7

Transaction ID: C4682362

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Nicholas J. Motherway Sr.

Mailing Address 100 W. Monroe St., Ste. 200

City State Zip Code
Chicago IL 60603-1902

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

Name of Employer Occupation
Motherway & Napleton Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 7

Transaction ID: C4276205

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Robert J. Napleton

Mailing Address 100 W. Monroe St., Ste. 200

City State Zip Code
Chicago IL 60603-1902

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

Name of Employer Occupation
Motherway & Napleton Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 7

Transaction ID: C4276204

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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 / 63
(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)
Braley for Congress

A.

Full Name (Last, First, Middle Initial)
David O'Brien

Mailing Address 3519 Center Point Rd. NE

City Cedar Rapids State IA Zip Code 52402

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

Name of Employer Willey Law Firm Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 26 / 2007

Transaction ID: C4337649

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Daniel O'Fallon

Mailing Address 815 Country Lakes Drive

City Circle Pines State MN Zip Code 55014

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

Name of Employer Robins Kaplan Miller & Ci-resi Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 10 / 2007

Transaction ID: C4204721

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Jack H. Olender

Mailing Address 888 17th St. NW, 4th Fl.

City Washington State DC Zip Code 20006

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

Name of Employer Jack H. Olender & Associates Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 26 / 2007

Transaction ID: C4284074

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 18 / 63

(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)
Braley for Congress

A.

Full Name (Last, First, Middle Initial)
Kathleen Flynn Peterson

Mailing Address 800 LaSalle Avenue South
Suite 2800

City State Zip Code
Minneapolis MN 55402

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

Name of Employer
Robins, Kaplan, Miller,
and Ciresi

Occupation
Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 0 7

Transaction ID: C4204727

Amount of Each Receipt this Period

2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Joseph A. Power

Mailing Address 70 W. Madison Street
Suite 5500

City State Zip Code
Chicago IL 60602

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

Name of Employer
Power Rogers & Smith

Occupation
Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 0 7

Transaction ID: C4204733

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Mary Beth Ramey

Mailing Address 8624 Bay Colony Dr

City State Zip Code
Indianapolis IN 46234-2912

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

Name of Employer
Self

Occupation
Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 0 7

Transaction ID: C4312464

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4300.00

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 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
Braley for Congress

A. Full Name (Last, First, Middle Initial)
Paul Rein

Mailing Address 200 Lakeside Drive, Suite A

City State Zip Code
Oakland CA 94612

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

Name of Employer Occupation
Law Offices of Paul Rein Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 30 / 2007

Transaction ID: C4337684

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Larry R. Rogers

Mailing Address 1355 S. Clark Street

City State Zip Code
Chicago IL 60605

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

Name of Employer Occupation
Power Rogers & Smith Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 10 / 2007

Transaction ID: C4204741

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Peter J. Rose

Mailing Address 409 Hanover Street

City State Zip Code
Fredericksburg VA 22401

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

Name of Employer Occupation
The Franklin Partnership Partner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 27 / 2007

Transaction ID: C4285486

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

FOR LINE NUMBER: PAGE 20 / 63

(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)
Braley for Congress

A.

Full Name (Last, First, Middle Initial)
Philip Sieff

Mailing Address 4000 Sunset Blvd

City State Zip Code
Minneapolis MN 55416

FEC ID number of contributing federal political committee. C

Name of Employer Robins Kaplan Miller and Ciresi
Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 10 / 2007

Transaction ID: C4204730

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Michael D. Smith

Mailing Address 3104 Rodman Street NW

City State Zip Code
Washington DC 20008

FEC ID number of contributing federal political committee. C

Name of Employer Cornerstone Government Affairs
Occupation Vice President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3250.00

Date of Receipt 06 / 29 / 2007

Transaction ID: C4301501

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Michael D. Smith

Mailing Address 3104 Rodman Street NW

City State Zip Code
Washington DC 20008

FEC ID number of contributing federal political committee. C

Name of Employer Cornerstone Government Affairs
Occupation Vice President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3250.00

Date of Receipt 06 / 29 / 2007

Transaction ID: C4762308

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 2250.00

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 / 63
(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)
Braley for Congress

A.

Full Name (Last, First, Middle Initial) Todd A. Smith		Date of Receipt MM / DD / YYYY 06 / 10 / 2007
Mailing Address Three First National Plaza 70 West Madison Street, 55th Floor		Transaction ID: C4204734
City Chicago	State IL	Zip Code 60602
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Power, Rogers and Smith	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B.

Full Name (Last, First, Middle Initial) Sharon Van Dyck		Date of Receipt MM / DD / YYYY 06 / 10 / 2007
Mailing Address 5120 IDS Center 80 S. Eighth St.		Transaction ID: C4204722
City Minneapolis	State MN	Zip Code 55402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Schwabel, Goetz & Sieben, P.A.	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Corey J. Walker		Date of Receipt MM / DD / YYYY 06 / 26 / 2007
Mailing Address 3768 Harbor Ave.		Transaction ID: C4337656
City Newton	State IA	Zip Code 50208
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 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

FOR LINE NUMBER: PAGE 22 / 63
(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)
Braley for Congress

A.

Full Name (Last, First, Middle Initial) Phil Weber		Date of Receipt MM / DD / YYYY 05 / 06 / 2007
Mailing Address 222 Southgate Drive		Transaction ID: C4190650
City Dubuque	State IA	Zip Code 52003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Anderson Weber	Occupation Auto Dealer	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) Cooney and Conway		Date of Receipt MM / DD / YYYY 06 / 10 / 2007
Mailing Address 120 N La Salle St FI 30		Transaction ID: C4682332
City Chicago	State IL	Zip Code 60602
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

PARTNERSHIP--partners below if itemized

C.

Full Name (Last, First, Middle Initial) Kevin Conway		Date of Receipt MM / DD / YYYY 06 / 10 / 2007
Mailing Address 120 N La Salle St FI 30		Transaction ID: C4432119
City Chicago	State IL	Zip Code 60602
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Cooney and Conway	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] *
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	42717.19

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Braley for Congress

A. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee
Mailing Address 430 S Capitol Street, S.E
City Washington State DC Zip Code 20003
FEC ID number of contributing federal political committee. **C** C00000935
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 132.31
Date of Receipt: 04 / 30 / 2007
Transaction ID: C4762062
Amount of Each Receipt this Period: 26.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind: Fundraising Services

B. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee
Mailing Address 430 S Capitol Street, S.E
City Washington State DC Zip Code 20003
FEC ID number of contributing federal political committee. **C** C00000935
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 132.31
Date of Receipt: 05 / 31 / 2007
Transaction ID: C4762065
Amount of Each Receipt this Period: 28.95
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind: Fundraising Services

C. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee
Mailing Address 430 S Capitol Street, S.E
City Washington State DC Zip Code 20003
FEC ID number of contributing federal political committee. **C** C00000935
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 132.31
Date of Receipt: 06 / 30 / 2007
Transaction ID: C4337924
Amount of Each Receipt this Period: 50.32
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind: Fundraising Services

SUBTOTAL of Receipts This Page (optional) ► 105.27
TOTAL This Period (last page this line number only) ► 105.27

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 63

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Braley for Congress

A.

Full Name (Last, First, Middle Initial)
AIR LINE PILOTS ASSOCIATION PAC

Mailing Address 1625 Massachusetts Ave. NW
8th Floor

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 7

Transaction ID: C4317385

Amount of Each Receipt this Period

2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
AIRCRAFT OWNERS AND PILOTS ASSOCIATION POLITICAL A

Mailing Address 421 Aviation Way

City State Zip Code
Frederick MD 21701

FEC ID number of contributing federal political committee. **C** C00131185

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: C4301505

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
AIRCRAFT OWNERS AND PILOTS ASSOCIATION POLITICAL A

Mailing Address 421 Aviation Way

City State Zip Code
Frederick MD 21701

FEC ID number of contributing federal political committee. **C** C00131185

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: C4301506

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4500.00

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 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
Braley for Congress

A. Full Name (Last, First, Middle Initial)
ALLIANT ENERGY CORPORATION EMPLOYEE'S POLITICAL AC

Mailing Address PO Box 77007

City Madison State WI Zip Code 53707

FEC ID number of contributing federal political committee. **C** C00132092

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: 06 / 20 / 2007
Transaction ID: C4276228

Amount of Each Receipt this Period: 1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
AMALGAMATED TRANSIT UNION-COPE

Mailing Address 5025 Wisconsin Avenue, NW

City Washington State DC Zip Code 20016

FEC ID number of contributing federal political committee. **C** C00032995

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 06 / 20 / 2007
Transaction ID: C4284126

Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PA)

Mailing Address 1015 15th Street NW, 8th floor

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 06 / 26 / 2007
Transaction ID: C4284008

Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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 / 63

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Braley for Congress

A.

Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EM

Mailing Address 1625 L Street NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 7

Transaction ID: C4285483

Amount of Each Receipt this Period

2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EM

Mailing Address 1625 L Street NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 0 7

Transaction ID: C4298684

Amount of Each Receipt this Period

2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
AMERICAN NURSES ASSOCIATION PAC

Mailing Address 8515 Georgia Avenue
Suite 400

City State Zip Code
Silver Spring MD 20910

FEC ID number of contributing federal political committee. **C** C00017525

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 6 / 2 0 0 7

Transaction ID: C4283979

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

6000.00

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 27 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
Braley for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN PODIATRIC MEDICAL ASSN. INC. PODIATRY POL

Mailing Address 9312 Old Georgetown Road

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing federal political committee. **C** C00008839

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 1 0 / 2 0 0 7

Transaction ID: C4204742

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
AMERICAN POSTAL WORKERS UNION COMMITTEE ON POLITIC

Mailing Address 1300 L Street NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00010322

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 0 / 2 0 0 7

Transaction ID: C4191616

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 499 S. Capitol St. SW, Suite 414

City State Zip Code
Washington DC 20003-4001

FEC ID number of contributing federal political committee. **C** C00271338

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: C4301503

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **7000.00**

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 28 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Braley for Congress

A. Full Name (Last, First, Middle Initial)
BARNES & THORNBURG POLITICAL ACTION COMMITTEE

Mailing Address 750 17th Street N.W.

City Washington State DC Zip Code 20006-4607

FEC ID number of contributing federal political committee. **C** C00395947

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 30 / 2007
Transaction ID: C4682361
 Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (

Mailing Address 100 Indiana Ave., NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt 06 / 28 / 2007
Transaction ID: C4318475
 Amount of Each Receipt this Period 2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL C

Mailing Address 501 Third St. NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00002089

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 06 / 26 / 2007
Transaction ID: C4312130
 Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3500.00

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 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Braley for Congress

A. Full Name (Last, First, Middle Initial)
COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL C

Mailing Address 501 Third St. NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00002089

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 06 / 28 / 2007
Transaction ID: C4317384
 Amount of Each Receipt this Period 4500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
CREDIT UNION LEGISLATIVE ACTION COUNCIL OF CUNA

Mailing Address 601 Pennsylvania Ave NW
South Building, Suite 600

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 05 / 04 / 2007
Transaction ID: C4284123
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
CREDIT UNION LEGISLATIVE ACTION COUNCIL OF CUNA

Mailing Address 601 Pennsylvania Ave NW
South Building, Suite 600

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 06 / 27 / 2007
Transaction ID: C4285481
 Amount of Each Receipt this Period 2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **7500.00**

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 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Braley for Congress

A. Full Name (Last, First, Middle Initial)
DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL

Mailing Address 8400 Westpark Dr

City State Zip Code
Mc Lean VA 22102-5116

FEC ID number of contributing federal political committee. **C** C00001636

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 4 / 2 0 0 7

Transaction ID: C4185190

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Holland & Knight Committee for Effective Governmen

Mailing Address 2099 Pennsylvania Avenue N.W.
Suite 100

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00171330

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 3 0 / 2 0 0 7

Transaction ID: C4432460

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
HOME DEPOT INC. POLITICAL ACTION COMMITTEE, THE

Mailing Address 101 Constiution Avve

City State Zip Code
Washington DC 20002

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 9 / 2 0 0 7

Transaction ID: C4191491

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **8000.00**

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 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Braley for Congress

A. Full Name (Last, First, Middle Initial)
HOPEFUND INC.
Mailing Address 607 14th Street NW Suite 800
City Washington State DC Zip Code 20002
FEC ID number of contributing federal political committee. **C** C00409052
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt 06 / 29 / 2007
Transaction ID: C4301522
Amount of Each Receipt this Period 5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL
Mailing Address 1615 L Street NW, Suite 900
City Washington State DC Zip Code 20036
FEC ID number of contributing federal political committee. **C** C00032698
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00
Date of Receipt 06 / 29 / 2007
Transaction ID: C4301512
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
INTL. UNION OF BRICKLAYERS & ALLIED CRAFTWORKERS
Mailing Address 620 F Street NW Suite 900
City Washington State DC Zip Code 20006
FEC ID number of contributing federal political committee. **C** C00003632
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 06 / 29 / 2007
Transaction ID: C4301507
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **6500.00**
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 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Braley for Congress

A. Full Name (Last, First, Middle Initial)
LAND O'LAKES INC/AGRILIANCE LLC PAC (LOL PAC) FKA

Mailing Address PO Box 64101

City State Zip Code
Saint Paul MN 55164

FEC ID number of contributing federal political committee. **C** C00009423

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 0 / 2 0 0 7

Transaction ID: C4276211

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
MACHINISTS NON PARTISAN POL LEAGUE OF THE INT'L AS

Mailing Address 9000 Machinist Pl.
Suite 201

City State Zip Code
Upper Marlboro MD 20772

FEC ID number of contributing federal political committee. **C** C00002469

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 9 / 2 0 0 7

Transaction ID: C4301523

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
MIDWEST REGION LABORERS' POLITICAL LEAGUE

Mailing Address 117 South 5th Street
Suite 720

City State Zip Code
Springfield IL 62701

FEC ID number of contributing federal political committee. **C** C00342907

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 0 / 2 0 0 7

Transaction ID: C4317386

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **11000.00**

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 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Braley for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC
 Mailing Address 1325 Massachusetts Ave NW
 City Washington State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C** C00238725
 Name of Employer Occupation
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00
 Date of Receipt: 05 / 15 / 2007
Transaction ID: C4193230
 Amount of Each Receipt this Period: 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC
 Mailing Address 1325 Massachusetts Ave NW
 City Washington State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C** C00238725
 Name of Employer Occupation
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00
 Date of Receipt: 06 / 27 / 2007
Transaction ID: C4285482
 Amount of Each Receipt this Period: 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC
 Mailing Address 1325 Massachusetts Ave NW
 City Washington State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C** C00238725
 Name of Employer Occupation
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00
 Date of Receipt: 06 / 29 / 2007
Transaction ID: C4301508
 Amount of Each Receipt this Period: 2000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00
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 / 63
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Braley for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF POSTMASTERS OF THE UNITED

Mailing Address 8 Herbert St

City State Zip Code
Alexandria VA 22305

FEC ID number of contributing federal political committee. **C** C00100404

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 8 / 2 0 0 7

Transaction ID: C4312133

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION

Mailing Address 430 N. Michigan Avenue

City State Zip Code
Chicago IL 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 7

Transaction ID: C4285484

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
NEA FUND FOR CHILDREN AND PUBLIC EDUCATION

Mailing Address 1201 16th Street NW, Suite 420

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 7

Transaction ID: C4285485

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Braley for Congress

A. Full Name (Last, First, Middle Initial)
NEW DEMOCRAT COALITION POLITICAL ACTION COMMITTEE

Mailing Address 607 14th Street NW, Suite 800

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00409730

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 0 1 / 2 0 0 7

Transaction ID: C3935421

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
OWNER-OPERATOR INDEPENDENT DRIVERS ASSN INC POLITI

Mailing Address 1101 30th St NW

City State Zip Code
Washington DC 20007-3708

FEC ID number of contributing federal political committee. **C** C00236778

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 6 / 2 0 0 7

Transaction ID: C4283977

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392

FEC ID number of contributing federal political committee. **C** C00128918

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 0 / 2 0 0 7

Transaction ID: C4191695

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **4500.00**

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 36 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Braley for Congress

A. Full Name (Last, First, Middle Initial)
QWEST COMMUNICATIONS INTERNATIONAL INC POLITICAL A
Mailing Address 607 14th Street NW, Suite 950
City Washington State DC Zip Code 20005
FEC ID number of contributing federal political committee. **C** C00237156
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 06 / 20 / 2007
Transaction ID: C4276214
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
ROBINS KAPLAN PAC
Mailing Address 1801 K St NW #1200
City Washington State DC Zip Code 20006
FEC ID number of contributing federal political committee. **C** C00275909
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt 06 / 10 / 2007
Transaction ID: C4204724
Amount of Each Receipt this Period 2000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT
Mailing Address 600 13th St NW
NW Suite 340
City Washington State DC Zip Code 20005-3005
FEC ID number of contributing federal political committee. **C** C00010470
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt 06 / 20 / 2007
Transaction ID: C4284131
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00
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 37 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
Braley for Congress

A. Full Name (Last, First, Middle Initial)
UNITED ASSOCIATION POLITICAL EDUCATION COMMITTEE

Mailing Address 901 Massachusetts Avenue NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00012476

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt: MM / DD / YYYY
06 / 20 / 2007

Transaction ID: C4284134

Amount of Each Receipt this Period: 5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
UNITED ASSOCIATION POLITICAL EDUCATION COMMITTEE

Mailing Address 901 Massachusetts Avenue NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00012476

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt: MM / DD / YYYY
06 / 20 / 2007

Transaction ID: C4312127

Amount of Each Receipt this Period: 5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
UNITED TRANSPORTATION UNION POLITICAL ACTION COMMI

Mailing Address 14600 Detroit Avenue

City Cleveland State OH Zip Code 44107

FEC ID number of contributing federal political committee. **C** C00001636

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: MM / DD / YYYY
04 / 26 / 2007

Transaction ID: C4185289

Amount of Each Receipt this Period: 5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 15000.00

TOTAL This Period (last page this line number only) ► 88000.00

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

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

FOR LINE NUMBER: PAGE 38 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Braley for Congress

A. Full Name (Last, First, Middle Initial)
Allied Insurance

Mailing Address The Sinnott Agency, Inc.
PO Box 1918

City Waterloo State IA Zip Code 50704

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1307.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 7 / 2 0 0 7

Transaction ID: C4283862

Amount of Each Receipt this Period
1307.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Wellmark Blue Cross Blue Shield

Mailing Address 636 Grand Ave.

City Des Moines State IA Zip Code 50309

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 438.95

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 3 / 2 0 0 7

Transaction ID: C4169439

Amount of Each Receipt this Period
438.95

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	1745.95
TOTAL This Period (last page this line number only)	▶	1745.95

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 63
(check only one)

<input 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 checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Braley for Congress

A.

Full Name (Last, First, Middle Initial)
Veridian Credit Union

Mailing Address 1827 Ansborough Ave

City Waterloo State IA Zip Code 50701

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1033.54

Date of Receipt 04 / 01 / 2007

Transaction ID: C4682329

Amount of Each Receipt this Period 58.17

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Veridian Credit Union

Mailing Address 1827 Ansborough Ave

City Waterloo State IA Zip Code 50701

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1033.54

Date of Receipt 05 / 01 / 2007

Transaction ID: C4682327

Amount of Each Receipt this Period 71.94

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Veridian Credit Union

Mailing Address 1827 Ansborough Ave

City Waterloo State IA Zip Code 50701

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1033.54

Date of Receipt 05 / 01 / 2007

Transaction ID: C4682328

Amount of Each Receipt this Period 0.01

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **130.12**

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 40 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Braley for Congress

A.

Full Name (Last, First, Middle Initial)
Veridian Credit Union
 Mailing Address 1827 Ansborough Ave
 City Waterloo State IA Zip Code 50701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1033.54

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 1 / 2 0 0 7
Transaction ID: C4682325
 Amount of Each Receipt this Period
 81.06
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Veridian Credit Union
 Mailing Address 1827 Ansborough Ave
 City Waterloo State IA Zip Code 50701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1033.54

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 1 / 2 0 0 7
Transaction ID: C4682326
 Amount of Each Receipt this Period
 0.01
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **81.07**
TOTAL This Period (last page this line number only) ► **211.19**

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Braley for Congress

A.	Full Name (Last, First, Middle Initial) Accurate Word LLC	Transaction ID: D170261 Date of Disbursement 04 / 02 / 2007
	Mailing Address 4481 White Plains Lane	Amount of Each Disbursement this Period 328.95
	City White Plains State MD Zip Code 20695	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Stationary for Office Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Accurate Word LLC	Transaction ID: D170262 Date of Disbursement 04 / 02 / 2007
	Mailing Address 4481 White Plains Lane	Amount of Each Disbursement this Period 330.00
	City White Plains State MD Zip Code 20695	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Stationary for Office Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Airline Highway Self Storage	Transaction ID: D170312 Date of Disbursement 05 / 01 / 2007
	Mailing Address P.O. Box 5	Amount of Each Disbursement this Period 436.56
	City Cedar Falls State IA Zip Code 50613	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Rent-Secure Storage Unit Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1095.51
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Braley for Congress

A.	Full Name (Last, First, Middle Initial) Airline Highway Self Storage <hr/> Mailing Address P.O. Box 5 <hr/> City Cedar Falls State IA Zip Code 50613 <hr/> Purpose of Disbursement Rent-Secure Storage Unit Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D170357 Date of Disbursement 06 / 04 / 2007 <hr/> Amount of Each Disbursement this Period 145.52 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Allied Insurance <hr/> Mailing Address The Sinnott Agency, Inc. PO Box 1918 <hr/> City Waterloo State IA Zip Code 50704 <hr/> Purpose of Disbursement General Liability Insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D170280 Date of Disbursement 04 / 09 / 2007 <hr/> Amount of Each Disbursement this Period 984.35 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) American Express Merchant Services <hr/> Mailing Address PO Box 53852 <hr/> City Phoenix State AZ Zip Code 85072-3852 <hr/> Purpose of Disbursement Credit Card Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D170286 Date of Disbursement 04 / 11 / 2007 <hr/> Amount of Each Disbursement this Period 0.41 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1130.28

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Braley for Congress

A.

Full Name (Last, First, Middle Initial)
Amoco Oil

Mailing Address I-380 and Highway 563

City Urbana State IA Zip Code 52345

Purpose of Disbursement
Fuel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2007
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D170291

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Blue Arch, LLC

Mailing Address Michelle McBride 300 Walnut St, Su

City Des Moines State IA Zip Code 50309

Purpose of Disbursement
Accounting & Compliance

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D170274

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Blue Arch, LLC

Mailing Address Michelle McBride 300 Walnut St, Su

City Des Moines State IA Zip Code 50309

Purpose of Disbursement
Accounting & Compliance

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D170305

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Braley for Congress

A.	Full Name (Last, First, Middle Initial) Blue Arch, LLC	Transaction ID: D170342 Date of Disbursement 05 / 29 / 2007
	Mailing Address Michelle McBride 300 Walnut St, Su	Amount of Each Disbursement this Period 1000.00
	City Des Moines State IA Zip Code 50309	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Accounting & Compliance Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Blue Arch, LLC	Transaction ID: D180471 Date of Disbursement 06 / 29 / 2007
	Mailing Address Michelle McBride 300 Walnut St, Su	Amount of Each Disbursement this Period 1000.00
	City Des Moines State IA Zip Code 50309	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Accounting & FEC Compliance Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bruce L. Braley	Transaction ID: D170346 Date of Disbursement 05 / 31 / 2007
	Mailing Address 247 Sheridan Rd	Amount of Each Disbursement this Period 61.65
	City Waterloo State IA Zip Code 50701-4021	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Travel Expense Reimbursement Candidate Name Bruce Braley	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2061.65
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bralley for Congress

A.	Full Name (Last, First, Middle Initial) Bruce L. Bralley	Transaction ID: D170347 Date of Disbursement 05 / 31 / 2007
	Mailing Address 247 Sheridan Rd	Amount of Each Disbursement this Period 199.04
	City Waterloo State IA Zip Code 50701-4021	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Travel Expense Reimbursement	Category/Type
	Candidate Name Bruce Bralley	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) COSI # 16 Q59 DC	Transaction ID: D170387 Date of Disbursement 06 / 29 / 2007
	Mailing Address 1751 Lake Cook Rd corporate office	Amount of Each Disbursement this Period 159.36
	City Deerfield State IL Zip Code 60015-5615	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fundraising Event Food	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) COSI # 16 Q59 DC	Transaction ID: D170311 Date of Disbursement 04 / 30 / 2007
	Mailing Address 1751 Lake Cook Rd corporate office	Amount of Each Disbursement this Period 221.05
	City Deerfield State IL Zip Code 60015-5615	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fundraising Event Food	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	579.45
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Braley for Congress

A.	Full Name (Last, First, Middle Initial) Crown Plaza Hotel	Transaction ID: D170373 Date of Disbursement 06 / 13 / 2007
	Mailing Address Cedar Rapids 350 1st Avenue, NE	Amount of Each Disbursement this Period 300.00
	City Cedar Rapids State IA Zip Code 52401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fundraising Event Facility Costs Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee	Transaction ID: D174079 Date of Disbursement 06 / 30 / 2007
	Mailing Address 430 S Capitol Street, S.E	Amount of Each Disbursement this Period 50.32
	City Washington State DC Zip Code 20003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fundraising Services Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

* in-kind received

C.	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee	Transaction ID: D202565 Date of Disbursement 05 / 10 / 2007
	Mailing Address 430 S Capitol Street, S.E	Amount of Each Disbursement this Period 3.16
	City Washington State DC Zip Code 20003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Credit Card Processing Fee Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	353.48
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Braley for Congress

A. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee Mailing Address 430 S Capitol Street, S.E. City Washington State DC Zip Code 20003 Purpose of Disbursement Fundraising Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D214108 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
	Amount of Each Disbursement this Period 26.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received

B. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee Mailing Address 430 S Capitol Street, S.E. City Washington State DC Zip Code 20003 Purpose of Disbursement Fundraising Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D214109 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 7
	Amount of Each Disbursement this Period 28.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received

C. Full Name (Last, First, Middle Initial) Paul DiNino Mailing Address 700 13th St NW City Washington State DC Zip Code 20005-3960 Purpose of Disbursement Washington National Baseball Ticket Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D166260 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 7
	Amount of Each Disbursement this Period 300.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received

SUBTOTAL of Disbursements This Page (optional) ▶	354.95
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Braley for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) DiNino Associates LLC</p> <p>Mailing Address 426 C Street NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Travel Air</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D170255</p> <p>Date of Disbursement 04 / 02 / 2007</p> <p>Amount of Each Disbursement this Period 378.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) DiNino Associates LLC</p> <p>Mailing Address 426 C Street NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Car Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D170256</p> <p>Date of Disbursement 04 / 02 / 2007</p> <p>Amount of Each Disbursement this Period 60.11</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) DiNino Associates LLC</p> <p>Mailing Address 426 C Street NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Hotel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D170257</p> <p>Date of Disbursement 04 / 02 / 2007</p> <p>Amount of Each Disbursement this Period 75.78</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

514.39

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Braley for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) DiNino Associates LLC</p> <p>Mailing Address 426 C Street NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Travel Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D170258</p> <p>Date of Disbursement 04 / 02 / 2007</p> <p>Amount of Each Disbursement this Period 23.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) DiNino Associates LLC</p> <p>Mailing Address 426 C Street NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Parking</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D170259</p> <p>Date of Disbursement 04 / 02 / 2007</p> <p>Amount of Each Disbursement this Period 40.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) DiNino Associates LLC</p> <p>Mailing Address 426 C Street NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Fundraising Consulting Retainer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D170270</p> <p>Date of Disbursement 04 / 02 / 2007</p> <p>Amount of Each Disbursement this Period 4000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4064.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Braley for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) DiNino Associates LLC</p> <p>Mailing Address 426 C Street NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Fundraising Consulting Retainer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D170275</p> <p>Date of Disbursement 04 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 4000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) DiNino Associates LLC</p> <p>Mailing Address 426 C Street NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Fundraising Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D170304</p> <p>Date of Disbursement 04 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 52.35</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) DiNino Associates LLC</p> <p>Mailing Address 426 C Street NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Air Fare, hotel and meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D170366</p> <p>Date of Disbursement 06 / 12 / 2007</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6552.35

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Braley for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) DiNino Associates LLC</p> <p>Mailing Address 426 C Street NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Fundraising Consulting Retainer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D170348</p> <p>Date of Disbursement 06 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 4000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) DiNino Associates LLC</p> <p>Mailing Address 426 C Street NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Fundraising Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D170349</p> <p>Date of Disbursement 06 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 22.55</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Expedia</p> <p>Mailing Address 3150 139th Ave SE</p> <p>City Bellevue State WA Zip Code 98005</p> <p>Purpose of Disbursement Travel Air Ticket Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D170310</p> <p>Date of Disbursement 04 / 30 / 2007</p> <p>Amount of Each Disbursement this Period 5.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4027.55

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Braley for Congress

A.	Full Name (Last, First, Middle Initial) Iowa Democratic Party Mailing Address 5661 Fleur Dr. City Des Moines State IA Zip Code 50321 Purpose of Disbursement Event Facility Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D170372 Date of Disbursement 06 / 13 / 2007 Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Loews Hotel Mailing Address 1601 Collins Ave City Miami Beach State FL Zip Code 33139 Purpose of Disbursement Hotel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D170330 Date of Disbursement 05 / 14 / 2007 Amount of Each Disbursement this Period 389.85 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) NGP Software, Inc. Mailing Address 1225 Eye Street, NW Suite 1225 City Washington State DC Zip Code 20005 Purpose of Disbursement Software Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D170269 Date of Disbursement 04 / 02 / 2007 Amount of Each Disbursement this Period 450.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1089.85

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Braley for Congress

A.	Full Name (Last, First, Middle Initial) NGP Software, Inc.	Transaction ID: D170260 Date of Disbursement 04 / 27 / 2007
	Mailing Address 1225 Eye Street, NW Suite 1225	Amount of Each Disbursement this Period 450.00
	City Washington State DC Zip Code 20005	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Software Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) NGP Software, Inc.	Transaction ID: D170364 Date of Disbursement 06 / 11 / 2007
	Mailing Address 1225 Eye Street, NW Suite 1225	Amount of Each Disbursement this Period 450.00
	City Washington State DC Zip Code 20005	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Software Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Northwest Airlines	Transaction ID: D170309 Date of Disbursement 04 / 30 / 2007
	Mailing Address 7500 Airline Drive	Amount of Each Disbursement this Period 603.60
	City Minneapolis State MN Zip Code 55450	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Travel - Air Fare Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1503.60
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Braley for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Northwest Airlines</p> <p>Mailing Address 7500 Airline Drive</p> <p>City Minneapolis State MN Zip Code 55450</p> <p>Purpose of Disbursement Travel - Air Fare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D170323</p> <p>Date of Disbursement 05 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 449.80</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Northwest Airlines</p> <p>Mailing Address 7500 Airline Drive</p> <p>City Minneapolis State MN Zip Code 55450</p> <p>Purpose of Disbursement Travel - Air Fare Adjustment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D170324</p> <p>Date of Disbursement 05 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Strategic Media, LTD</p> <p>Mailing Address 111 W San Marnan Drive PO Box 2817</p> <p>City Waterloo State IA Zip Code 50701</p> <p>Purpose of Disbursement Internet - Web Page Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D170276</p> <p>Date of Disbursement 04 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 105.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ►

564.80

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Braley for Congress

A.

Full Name (Last, First, Middle Initial)
Strategic Media, LTD

Mailing Address 111 W San Marnan Drive PO Box 2817

City Waterloo State IA Zip Code 50701

Purpose of Disbursement
Internet - Web Page Expenses

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D170300

Date of Disbursement

04 / 25 / 2007

Amount of Each Disbursement this Period

996.39

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
The Greek Tavern

Mailing Address 6828 Old Dominion Dr

City McLean State VA Zip Code 22101

Purpose of Disbursement
Fundraising Events Food Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D170361

Date of Disbursement

06 / 06 / 2007

Amount of Each Disbursement this Period

126.38

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
The Greek Tavern

Mailing Address 6828 Old Dominion Dr

City McLean State VA Zip Code 22101

Purpose of Disbursement
Fundraising Events Food Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D170370

Date of Disbursement

06 / 12 / 2007

Amount of Each Disbursement this Period

108.42

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1231.19

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Braley for Congress

A.	Full Name (Last, First, Middle Initial) U.S. Cellular Mailing Address 8410 W Bryn Mawr Ste 700 City Chicago State IL Zip Code 60631 Purpose of Disbursement Cell Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D170374 Date of Disbursement 06 / 13 / 2007 Amount of Each Disbursement this Period 118.82 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) U.S. Cellular Mailing Address 8410 W Bryn Mawr Ste 700 City Chicago State IL Zip Code 60631 Purpose of Disbursement Cell Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D170265 Date of Disbursement 04 / 02 / 2007 Amount of Each Disbursement this Period 248.53 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) U.S. Cellular Mailing Address 8410 W Bryn Mawr Ste 700 City Chicago State IL Zip Code 60631 Purpose of Disbursement Cell Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D170326 Date of Disbursement 05 / 11 / 2007 Amount of Each Disbursement this Period 120.56 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	487.91
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Braley for Congress

A.

Full Name (Last, First, Middle Initial)
U.S. Cellular

Transaction ID: D170331
Date of Disbursement

Mailing Address 8410 W Bryn Mawr Ste 700

/ /

City Chicago State IL Zip Code 60631

Amount of Each Disbursement this Period

Purpose of Disbursement

Cell Phone

Category/Type

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
United Airlines

Transaction ID: D170344
Date of Disbursement

Mailing Address PO Box 66100

/ /

City Chicago State IL Zip Code 60666-0100

Amount of Each Disbursement this Period

Purpose of Disbursement

Travel Air

Category/Type

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
United Airlines

Transaction ID: D170320
Date of Disbursement

Mailing Address PO Box 66100

/ /

City Chicago State IL Zip Code 60666-0100

Amount of Each Disbursement this Period

Purpose of Disbursement

Travel Air

Category/Type

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

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) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Braley for Congress

A.

Full Name (Last, First, Middle Initial)
United Airlines

Transaction ID: D170321

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	0	7

Mailing Address PO Box 66100

Amount of Each Disbursement this Period

15.00

City Chicago State IL Zip Code 60666-0100

Purpose of Disbursement
Travel Air Fare Adjustment

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
United States Treasury

Transaction ID: D170281

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	0	7

Mailing Address 5800 E Bannister Rd

Amount of Each Disbursement this Period

1050.89

City Kansas City State MO Zip Code 64134-1192

Purpose of Disbursement
Payroll Taxes - Federal

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
USPS

Transaction ID: D170272

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	0	7

Mailing Address 300 Sycamore Ave Waterloo, Iowa

Amount of Each Disbursement this Period

4.44

City Waterloo State IA Zip Code 50701

Purpose of Disbursement
Operational Postage

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

1070.33

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Braley for Congress

A.	Full Name (Last, First, Middle Initial) USPS Mailing Address 300 Sycamore Ave Waterloo, Iowa City Waterloo State IA Zip Code 50701 Purpose of Disbursement Operational Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D170345 Date of Disbursement 05 / 31 / 2007 Amount of Each Disbursement this Period 16.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) USPS Mailing Address 300 Sycamore Ave Waterloo, Iowa City Waterloo State IA Zip Code 50701 Purpose of Disbursement Operational Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D170329 Date of Disbursement 05 / 14 / 2007 Amount of Each Disbursement this Period 5.67 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) USPS Mailing Address 300 Sycamore Ave Waterloo, Iowa City Waterloo State IA Zip Code 50701 Purpose of Disbursement Operational Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D170375 Date of Disbursement 06 / 13 / 2007 Amount of Each Disbursement this Period 6.86 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

28.78

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Braley for Congress

A.	Full Name (Last, First, Middle Initial) USPS Mailing Address 300 Sycamore Ave Waterloo, Iowa City Waterloo State IA Zip Code 50701 Purpose of Disbursement Operational Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D170378 Date of Disbursement 06 / 15 / 2007 Amount of Each Disbursement this Period 2.27 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) USPS Mailing Address 300 Sycamore Ave Waterloo, Iowa City Waterloo State IA Zip Code 50701 Purpose of Disbursement Operational Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D170384 Date of Disbursement 06 / 22 / 2007 Amount of Each Disbursement this Period 5.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) USPS Mailing Address 300 Sycamore Ave Waterloo, Iowa City Waterloo State IA Zip Code 50701 Purpose of Disbursement Operational Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D170340 Date of Disbursement 05 / 21 / 2007 Amount of Each Disbursement this Period 16.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

23.77

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Braley for Congress

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: D170379
	Mailing Address PO Box 660108	Date of Disbursement 06 / 15 / 2007
	City Dallas State TX Zip Code 75266-0108	Amount of Each Disbursement this Period 168.43
	Purpose of Disbursement Cell Phone	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: D170333
	Mailing Address PO Box 660108	Date of Disbursement 05 / 15 / 2007
	City Dallas State TX Zip Code 75266-0108	Amount of Each Disbursement this Period 215.27
	Purpose of Disbursement Cell Phone	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: D170303
	Mailing Address PO Box 660108	Date of Disbursement 04 / 26 / 2007
	City Dallas State TX Zip Code 75266-0108	Amount of Each Disbursement this Period 264.36
	Purpose of Disbursement Cell Phone	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	648.06
TOTAL This Period (last page this line number only)	30132.14

Form/Schedule: **F3A**

Transaction ID:

Report is amended to update cash on hand figures. The receipts from Individuals has increased due to the correction of the transaction dates for several contributions received via credit card and previously reported as having been received in Q3. Additionally, 2 contributions which were inadvertently omitted from the prior reports have also been added, totaling \$2,500. Missing employer and occupation information has been added. In-Kind contributions from the DCCC have been correctly reported. Bank interest earned which was inadvertently omitted has been added. The change in disbursements over previous reports is due to transaction date corrections which were also disclosed on the amended April 2007 Quarterly report.

Form/Schedule: **SB17**

Cab Fare - Dearborn to Airport 29.00 Cab Fare Airport to Detroit for Fund Raising Event

Transaction ID: **D170346**

Image# 28931497033

Form/Schedule: **SB17** House Member Dining Washington DC 3/28/2007 23.90 3/28/2007 27.90 4/19/2007 57.30 Monicle On Capital
Transaction ID: **D170347** Washington DC 89.94

Form/Schedule: **SB17** Reimbursement of expense from; Orbits.com 500 West Madison Street Suite 1000 Chicago IL 60661
Transaction ID: **D170366**
