

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO Box 156
Check if different than previously reported. (ACC) Des Moines IA 50301

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00752253
3. IS THIS REPORT NEW OR AMENDED (A) [x] (N) []

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report
(b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31
(c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special
(d) 30-Day POST-Election Report for the: General, Runoff, Special
Election on 11/03/2020 in the State of IA

5. Covering Period 10/15/2020 through 11/23/2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Datwyler, Thomas, , ,
Type or Print Name of Treasurer

Signature of Treasurer Datwyler, Thomas, , , [Electronically Filed] Date 11/24/2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Hawkeye Fund

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="24095.20"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="214300.00"/>	<input type="text" value="533000.10"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="238395.20"/>	<input type="text" value="533000.10"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="233187.39"/>	<input type="text" value="527792.29"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="5207.81"/>	<input type="text" value="5207.81"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Hawkeye Fund

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	214300.00	533000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	214300.00	533000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	214300.00	533000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.10
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	214300.00	533000.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	214300.00	533000.10

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	23609.37	75337.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	23609.37	75337.87
22. Transfers to Affiliated/Other Party Committees.....	193978.02	436854.42
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	15600.00	15600.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	15600.00	15600.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	233187.39	527792.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	233187.39	527792.29

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	214300.00	533000.00
34. Total Contribution Refunds (from Line 28(d))	15600.00	15600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	198700.00	517400.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	23609.37	75337.87
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	23609.37	75337.87

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 20
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Hawkeye Fund

A. Bernstein, Lawrence, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 E Huron Street
 Apt. 4002
 City Chicago State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Trader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **10 / 15 / 2020**
Transaction ID : SA11AI.4223
 Amount of Each Receipt this Period 10000.00
 Memo Item

B. Bernstein, Lawrence, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 E Huron Street
 Apt. 4002
 City Chicago State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Trader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt **11 / 14 / 2020**
Transaction ID : SA11AI.4335
 Amount of Each Receipt this Period 10000.00
 Memo Item

C. Blanchard, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6001 River Road
 Suite 100
 City Columbus State GA Zip Code 31904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 28 / 2020**
Transaction ID : SA11AI.4280
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	21000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 20
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Hawkeye Fund

A. Brownstein, Norman, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 410 17th Street
 City Denver State CO Zip Code 80202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 28 / 2020
Transaction ID : SA11AI.4282
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Busch, August, A., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One Mid Rivers Mall Drive 210
 City Saint Peters State MO Zip Code 63376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 10 / 16 / 2020
Transaction ID : SA11AI.4249
 Amount of Each Receipt this Period 25000.00
 Memo Item

C. Cameron, Ronald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 21440
 City Little Rock State AR Zip Code 72221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mountaire Occupation (for Individual) Chairman
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 05 / 2020
Transaction ID : SA11AI.4292
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	35000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Hawkeye Fund

A. Cook, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 386 Mountain Home Road
 City Woodside State CA Zip Code 94062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Intuit Occupation (for Individual) Business Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 16 / 2020
Transaction ID : SA11AI.4221
 Amount of Each Receipt this Period 10000.00
 Memo Item

B. Cooney, Manus, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1800 M Street NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Continental Group Occupation (for Individual) Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 11 / 2020
Transaction ID : SA11AI.4299
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Craft, Joe, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1717 S Boulder Avenue Suite 400
 City Tulsa State OK Zip Code 74119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alliance Coal LLC Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 24 / 2020
Transaction ID : SA11AI.4263
 Amount of Each Receipt this Period 10000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	20500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Hawkeye Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Gooman, Murray, , ,

Mailing Address 911 North Ocean Boulevard

City Palm Beach State FL Zip Code 33480

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

Name of Employer (for Individual) The Goodman Company Occupation (for Individual) Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 11 / 13 / 2020

Transaction ID : SA11AI.4317

Amount of Each Receipt this Period 3000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Graefe, Fred, , ,

Mailing Address 319 Constitution Avenue Northeast

City Washington State DC Zip Code 20002

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

Name of Employer (for Individual) Graefe Law Occupation (for Individual) Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 16 / 2020

Transaction ID : SA11AI.4388

Amount of Each Receipt this Period 500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Grillo, Anthony, , ,

Mailing Address 110 Street Road

City New Hope State PA Zip Code 18938

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

Name of Employer (for Individual) Retired Occupation (for Individual) Retired

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 28 / 2020

Transaction ID : SA11AI.4284

Amount of Each Receipt this Period 10000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 13500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 20
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Hawkeye Fund

A. Hendricks, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One ABC Parkway
 City Beloit State WI Zip Code 53511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hendricks Holdings Occupation (for Individual) Chairman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2020
Transaction ID : SA11AI.4243
 Amount of Each Receipt this Period
 20600.00
 Memo Item

B. Isaac, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75 Prospect Avenue
 City Larchmont State NY Zip Code 10538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Arbitr Partners Capital Mgmt Occupation (for Individual) Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2020
Transaction ID : SA11AI.4257
 Amount of Each Receipt this Period
 2000.00
 Memo Item

C. Jones, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12916 Bay Plantation Drive
 City Jacksonville State FL Zip Code 32223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pegasystems, Inc. Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2020
Transaction ID : SA11AI.4272
 Amount of Each Receipt this Period
 10000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	32600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Hawkeye Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Klingenstein, Tom, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2020
Mailing Address 263 Tresser Blvd. 5th Floor		Transaction ID : SA11AI.4251
City Stamford	State CT	Zip Code 06901
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20600.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kolber, Vincent, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2020
Mailing Address 70 W Madison Street 2200		Transaction ID : SA11AI.4247
City Chicago	State IL	Zip Code 60602
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2800.00
Name of Employer (for Individual) Residco	Occupation (for Individual) Chairman	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2800.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Leone, Douglas, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2020
Mailing Address 13385 Robleda Road		Transaction ID : SA11AI.4203
City Los Altos Hills	State CA	Zip Code 94022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20600.00
Name of Employer (for Individual) Sequoia Capital	Occupation (for Individual) Investor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 20600.00	

SUBTOTAL of Receipts This Page (optional).....	44000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 20
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Hawkeye Fund

A. McCormick, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3200 Cherry Creek South Drive
 230
 City Denver State CO Zip Code 80209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2020
Transaction ID : SA11AI.4255
 Amount of Each Receipt this Period
 10000.00
 Memo Item

B. McMickle, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8021 Ellingson Drive
 City Chevy Chase State MD Zip Code 20815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2020
Transaction ID : SA11AI.4370
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Qazi, Mohammad, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6405 Middlebelt Road
 City West Bloomfield State MI Zip Code 48322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ciena Healthcare Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2020
Transaction ID : SA11AI.4294
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 20
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Hawkeye Fund

A. Rill, Jim, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7305 Masters Drive

City Rockville	State MD	Zip Code 20854
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Baker Botts LLP	Occupation (for Individual) Senior Counsel
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2020

Transaction ID : SA11AI.4296

Amount of Each Receipt this Period
1000.00

Memo Item

B. Rowan, Carolyn, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 927 5th Avenue
Floor 6

City New York	State NY	Zip Code 10021
------------------	-------------	-------------------

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

Name of Employer (for Individual) Carolyn Rowan Accessories LLC	Occupation (for Individual) Owner
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2020

Transaction ID : SA11AI.4274

Amount of Each Receipt this Period
5600.00

Memo Item

C. Rowan, Carolyn, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 927 5th Avenue
Floor 6

City New York	State NY	Zip Code 10021
------------------	-------------	-------------------

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

Name of Employer (for Individual) Carolyn Rowan Accessories LLC	Occupation (for Individual) Owner
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2020

Transaction ID : SA11AI.4276

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	11600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Hawkeye Fund

A. Rowan, Marc, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 927 5th Avenue
 Floor 6
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Apollo Global Management Occupation (for Individual) Co-Founder
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **5600.00**

Date of Receipt **10 / 28 / 2020**
Transaction ID : SA11AI.4277
 Amount of Each Receipt this Period **5600.00**
 Memo Item

B. Rowan, Marc, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 927 5th Avenue
 Floor 6
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Apollo Global Management Occupation (for Individual) Co-Founder
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **10600.00**

Date of Receipt **10 / 28 / 2020**
Transaction ID : SA11AI.4279
 Amount of Each Receipt this Period **5000.00**
 Memo Item

C. Stark Jr., C. Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 651 S Ocean Blvd.
 City Boca Raton State FL Zip Code 33432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) First American Bank Occupation (for Individual) President
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **10000.00**

Date of Receipt **10 / 15 / 2020**
Transaction ID : SA11AI.4225
 Amount of Each Receipt this Period **10000.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	20600.00
TOTAL This Period (last page this line number only).....	214300.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hawkeye Fund

Full Name (Last, First, Middle Initial)

A. 9Seven Consulting

Mailing Address 499 South Capitol Street SW
#405

City Washington State DC Zip Code 20003

Purpose of Disbursement
Compliance Consulting

001
Category/
Type

Candidate Name

Hawkeye Fund

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4271

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. 9Seven Consulting

Mailing Address 499 South Capitol Street SW
#405

City Washington State DC Zip Code 20003

Purpose of Disbursement
Compliance Consulting

001
Category/
Type

Candidate Name

Hawkeye Fund

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4288

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Anedot

Mailing Address 1340 Poydras Street Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement
Credit Card Fees

001
Category/
Type

Candidate Name

Hawkeye Fund

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4270

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hawkeye Fund

Full Name (Last, First, Middle Initial)

A. Anedot

Mailing Address 1340 Poydras Street Suite 1770

City
New Orleans

State
LA

Zip Code
70112

Purpose of Disbursement
Credit Card Fees

001

Category/
Type

Candidate Name

Hawkeye Fund

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2020			

FEC Identification Number

C C00752253

Transaction ID : SB21B.4286

Amount of Each Disbursement this Period

400.30

Memo Item

Full Name (Last, First, Middle Initial)

B. Anedot

Mailing Address 1340 Poydras Street Suite 1770

City
New Orleans

State
LA

Zip Code
70112

Purpose of Disbursement
Credit Card Fees

001

Category/
Type

Candidate Name

Hawkeye Fund

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			23			2020			

FEC Identification Number

C C00752253

Transaction ID : SB21B.4353

Amount of Each Disbursement this Period

221.50

Memo Item

Full Name (Last, First, Middle Initial)

C. The Morning Group, LLC

Mailing Address 421 Shepherd Street NW

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
Fundraising Consulting

001

Category/
Type

Candidate Name

Hawkeye Fund

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			19			2020			

FEC Identification Number

C C00752253

Transaction ID : SB21B.4352

Amount of Each Disbursement this Period

20070.69

Memo Item

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

20692.49

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

23609.37

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hawkeye Fund

Full Name (Last, First, Middle Initial)

A. GRASSLEY COMMITTEE INC

Mailing Address PO BOX 1000

City
DES MOINES

State
IA

Zip Code
50304

Purpose of Disbursement
Transfer to Authorized Committee

008

Candidate Name

GRASSLEY, CHARLES E, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: IA District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2020			

FEC Identification Number

C C00230482

Transaction ID : SB22.4267

Amount of Each Disbursement this Period

40203.92

Memo Item

Full Name (Last, First, Middle Initial)

B. GRASSLEY COMMITTEE INC

Mailing Address PO BOX 1000

City
DES MOINES

State
IA

Zip Code
50304

Purpose of Disbursement
Transfer to Authorized Committee

008

Candidate Name

GRASSLEY, CHARLES E, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: IA District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2020			

FEC Identification Number

C C00230482

Transaction ID : SB22.4268

Amount of Each Disbursement this Period

32262.41

Memo Item

Full Name (Last, First, Middle Initial)

C. GRASSLEY COMMITTEE INC

Mailing Address PO BOX 1000

City
DES MOINES

State
IA

Zip Code
50304

Purpose of Disbursement
Transfer to Authorized Committee

008

Candidate Name

GRASSLEY, CHARLES E, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: IA District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2020			

FEC Identification Number

C C00230482

Transaction ID : SB22.4290

Amount of Each Disbursement this Period

14726.07

Memo Item

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

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

87192.40

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

Hawkeye Fund

Full Name (Last, First, Middle Initial)

A. GRASSLEY COMMITTEE INC

Mailing Address PO BOX 1000

City
DES MOINES

State
IA

Zip Code
50304

Purpose of Disbursement
Transfer to Authorized Committee

008

Candidate Name

GRASSLEY, CHARLES E, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: IA District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2020			

FEC Identification Number

C C00230482

Transaction ID : SB22.4291

Amount of Each Disbursement this Period

13155.29

Memo Item

Full Name (Last, First, Middle Initial)

B. REPUBLICAN PARTY OF IOWA

Mailing Address 621 E 9TH ST

City
DES MOINES

State
IA

Zip Code
50309

Purpose of Disbursement
Transfer to Authorized Committee

008

Candidate Name

Hawkeye Fund

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2020			

FEC Identification Number

C C00752253

Transaction ID : SB22.4269

Amount of Each Disbursement this Period

32217.29

Memo Item

Full Name (Last, First, Middle Initial)

C. THE HAWKEYE PAC

Mailing Address PO BOX 156

City
DES MOINES

State
IA

Zip Code
50301

Purpose of Disbursement
Transfer to Authorized Committee

008

Candidate Name

Hawkeye Fund

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2020			

FEC Identification Number

C C00752253

Transaction ID : SB22.4266

Amount of Each Disbursement this Period

42956.38

Memo Item

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

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

88328.96

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Hawkeye Fund

Full Name (Last, First, Middle Initial)

A. THE HAWKEYE PAC

Mailing Address PO BOX 156

City
DES MOINES

State
IA

Zip Code
50301

Purpose of Disbursement
Transfer to Authorized Committee

001
 002
 003
 004
 005
 006
 007
 008
 009
 010
Category/
Type

Candidate Name

Hawkeye Fund

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2020			

FEC Identification Number

C C00752253

Transaction ID : SB22.4289

Amount of Each Disbursement this Period

18456.66

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

001
 002
 003
 004
 005
 006
 007
 008
 009
 010
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

001
 002
 003
 004
 005
 006
 007
 008
 009
 010
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

18456.66

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

193978.02

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hawkeye Fund

Full Name (Last, First, Middle Initial)

A. Hendricks, Diane, , ,

Mailing Address One ABC Parkway

City
Beloit

State
WI

Zip Code
53511

Purpose of Disbursement
Contribution Refund

Category/
Type

Candidate Name

Hawkeye Fund

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2020			

FEC Identification Number

C C00752253

Transaction ID : SB28A.4245

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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