Form **8872**
(November 2002)
Department of the Treasury
Internal Revenue Service

# Political Organization Report of Contributions and Expenditures

▶ See separate instructions.

OMB No. 1545-1696

**A For the period beginning** 01/01/2010 **and ending** 03/31/2010

**B Check applicable box:** ✔ Initial report ___ Change of address ___ Amended report ___ Final report

**1 Name of organization**
NextGen PAC

**Employer identification number**
27 - 0823074

**2 Mailing address (P.O. box or number, street, and room or suite number)**
8805 Chambery Blvd., Ste. 300, PMB

**City or town, state, and ZIP code**
Johnston, IA 50131

**3 E-mail address of organization:**
no@email

**4 Date organization was formed:**
07/01/2009

**5a Name of custodian of records**
Sandy Greiner

**5b Custodian's address**
8805 Chambery Blvd., Ste. 300, PMB
Johnston, IA 50131

**6a Name of contact person**
Sandy Greiner

**6b Contact person's address**
8805 Chambery Blvd., Ste. 300, PMB
Johnston, IA 50131

**7 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number**
8805 Chambery Blvd., Ste. 300, PMB

**City or town, state, and ZIP code**
Johnston, IA 50131

**8 Type of report (check only one box)**

✔ First quarterly report
(due by April 15)
___ Second quarterly report
(due by July 15)
___ Third quarterly report
(due by October 15)
___ Year-end report
(due by January 31)
___ Mid-year report (Non-election year only-due by July 31)

___ Monthly report for the month of:
(due by the 20th day following the month shown above, except the December report, which is due by January 31)
___ Pre-election report (due by the 12th or 15th day before the election)
(1) Type of election:
(2) Date of election:
(3) For the state of:
___ Post-general election report (due by the 30th day after general election)
(1) Date of election:
(2) For the state of:

**9 Total amount of reported contributions (total from all attached Schedules A)** ..... **9. $** 0

**10 Total amount of reported expenditures (total from all attached Schedules B)** ..... **10. $** 12296

Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

**Sign Here** ▶ Karen Blackistone
Signature of authorized official

▶ 04/12/2010
Date

## Schedule A Itemized Contributions

## Schedule B Itemized Expenditures



**Recipient's name, mailing address and ZIP code**
GOP Lounge, LLC
2100 M Street, NW Suite 170-343
Washington, DC 20037

**Name of recipient's employer**
N/A

**Recipients's occupation**
N/A

**Amount of Expenditure**
$ 3750

**Date of expenditure**
01/15/2010

**Purpose of expenditure**
Professional Fees

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**Recipient's name, mailing address and ZIP code**
GOP Lounge, LLC
2100 M Street, NW Suite 170-343
Washington, DC 20037

**Name of recipient's employer**
N/A

**Recipients's occupation**
N/A

**Amount of Expenditure**
$ 3750

**Date of expenditure**
02/15/2010

**Purpose of expenditure**
Professional Fees.

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**Recipient's name, mailing address and ZIP code**
GOP Lounge, LLC
2100 M Street, NW Suite 170-343
Washington, DC 20037

**Name of recipient's employer**
N/A

**Recipients's occupation**
N/A

**Amount of Expenditure**
$ 3750

**Date of expenditure**
03/15/2010

**Purpose of expenditure**
Professional Fees.

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**Recipient's name, mailing address and ZIP code**
Holtzman Vogel, PLLC
45 North Hill Drive Suite 100
Warrenton, VA 20186

**Name of recipient's employer**
N/A

**Recipients's occupation**
N/A

**Amount of Expenditure**
$ 843

**Date of expenditure**
03/05/2010

**Purpose of expenditure**
Professional Fees.

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**Recipient's name, mailing address and ZIP code**
Aggregate below Threshold
8805 Chambery Blvd., Ste. 300, PMB
Johnston, IA 50131

**Name of recipient's employer**
N/A

**Recipients's occupation**
N/A

**Amount of Expenditure**
$ 203

**Date of expenditure**
03/31/2010

**Purpose of expenditure**
Postage Fees.