24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
PRIORITIES FOR IOWA POLITICAL FUND	
	C C00568170
Check if 24-hour report 48-hour report New report Amends report filed	d on
Full Name of Payee	Date of Public Distribution/Dissemination
Koopmans Consulting LLC	M M / D D / Y Y Y Y
Mailing Address 31219 Napa Valley Dr.	09 25 2020
	Amount
City State Zip Code	110830.00
Waukee IA 50263	Transaction ID : SE.4254 Date of Disbursement or Obligation
Purpose of Expenditure Mailing Category/ Type 004	09 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	ce Sought: House District: 00
GREENFIELD, THERESA, , ,	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disb 2020	oursement For: Primary X General Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	ce Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Dist	pursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	110830.00
40 OUDTOTAL (11 %) 11 1 1 1 1 5 1 1 5	
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	110830.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
	09 25 2020
Signature	