

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 65 OF 224	
(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)
JONI FOR IOWA

Full Name (Last, First, Middle Initial) VRIEZE, TERRY, A., ,		Date of Receipt MM / DD / YYYY 05 / 29 / 2018	
Mailing Address 7017 HICKMAN RD		Transaction ID : SA11A.90890	
City URBANDALE	State IA	Zip Code 50322-4846	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer SUCCESSFUL RESOURCE MANAGEMENT L	Occupation FINANCIAL ADVISOR	<input type="checkbox"/> Memo Item CONTRIBUTION	
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) WEST, VALERIE, S., MRS.,		Date of Receipt MM / DD / YYYY 05 / 29 / 2018	
Mailing Address 2509 N. MCKINLEY ST.		Transaction ID : SA11A.90888	
City ARLINGTON	State VA	Zip Code 22207-1216	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer VAN HUEVELEN STRATEGIES	Occupation PRINCIPAL	<input type="checkbox"/> Memo Item CONTRIBUTION	
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) WOELBER, SARAH, , MRS.,		Date of Receipt MM / DD / YYYY 05 / 29 / 2018	
Mailing Address 1515 CROWN RIDGE DR.		Transaction ID : SA11A.90826	
City SIOUX CENTER	State IA	Zip Code 51250-2922	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF	<input type="checkbox"/> Memo Item CONTRIBUTION	
Receipt For: 2020 <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).....		1250.00
TOTAL This Period (last page this line number only).....		