

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

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

FOR LINE NUMBER: PAGE 7 OF 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JONI'S ROAST AND RIDE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRUCE, MARY, , MRS.,

Mailing Address 1869 GLEN OAKS DRIVE

City
WEST DES MOINES

State
IA

Zip Code
50266-6608

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BRUCE INVESTMENTS

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 27 / 2017

Transaction ID : SA11A.82652

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CROELL, KURT, , MR.,

Mailing Address 702 E. HWY 24

City
LAWLER

State
IA

Zip Code
52154-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CROELL, INC.

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 28 / 2017

Transaction ID : SA11A.82653

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCANINCH, DONNA, F., MRS.,

Mailing Address 6617 SCENIC RIDGE COURT

City
JOHNSTON

State
IA

Zip Code
50131-4900

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MCANINCH CORPORTATION

Occupation (for Individual)
PUBLIC RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

15400.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 28 / 2017

Transaction ID : SA11A.82654

Amount of Each Receipt this Period

15400.00

☐ Memo Item
CONTRIBUTION

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

25400.00

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