

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

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

FOR LINE NUMBER:
(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
YOUNG FOR IOWA, INC.

A. Full Name (Last, First, Middle Initial) DOLL, JULIA, , ,			Date of Receipt M M / D D / Y Y Y Y Y 02 / 06 / 2020	
Mailing Address 515 E LOCUST ST STE 500			Transaction ID : A9B194D1338A14BB99C6	
City DES MOINES	State IA	Zip Code 50309-1970	Amount of Each Receipt this Period _____ 500.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer NONE		Occupation HOMEMAKER		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 1500.00		
B. Full Name (Last, First, Middle Initial) DASHNER, SHERRILL, , ,			Date of Receipt M M / D D / Y Y Y Y Y 02 / 25 / 2020	
Mailing Address 66895 PAINTER RD			Transaction ID : AFCB8C6D52C3B43E8870	
City PACIFIC JUNCTION	State IA	Zip Code 51561-4112	Amount of Each Receipt this Period _____ 200.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer NONE		Occupation RETIRED		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 300.00		
C. Full Name (Last, First, Middle Initial) DELASHMUTT, TOM, , ,			Date of Receipt M M / D D / Y Y Y Y Y 01 / 13 / 2020	
Mailing Address PO BOX 151			Transaction ID : A0C50200222B14089AD5	
City GLENWOOD	State IA	Zip Code 51534-0151	Amount of Each Receipt this Period _____ 500.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer NONE		Occupation RETIRED		
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)..... ▶			_____ 1200.00	
TOTAL This Period (last page this line number only)..... ▶			_____	