

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 OF 29

(check only one)

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

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NAME OF COMMITTEE (In Full)

ERNST VICTORY IOWA

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

A. GRAHAM, HOWARD, H., MR.,

Mailing Address 14980 KARL AVE

City
MONTE SERENO

State
CA

Zip Code
95030-2226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 21 / 2018

Transaction ID : SA11A.90743

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

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

B. KIRKE, GERALD, M., MR.,

Mailing Address 5465 MILLS CIVIC PARKWAY STE 400

City
WEST DES MOINES

State
IA

Zip Code
50266-5321

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KIRKE FINANCIAL

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 21 / 2018

Transaction ID : SA11A.90760

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

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

C. KIRKE, SUE, HAGEDORN, MRS.,

Mailing Address 1071 65TH STREET

City
WEST DES MOINES

State
IA

Zip Code
50266-2301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 21 / 2018

Transaction ID : SA11A.90759

Amount of Each Receipt this Period

15000.00

☐ Memo Item
CONTRIBUTION

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

30000.00

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