STATEMENT OF

PAGE 1 / 11 =

FEC FORM 1			DRGAI			_							Office	· Use (Only			
1. NAME OF COMMITTEE (ir	n full)	П	(Check if na is changed)	ıme		le:If ty		ype		12E	E4	М5						
IOWA DEM	,	ATIC		′														
																		Ш
ADDRESS (number a	nd street)	5661 F	leur Drive															
(Check if a is changed									ı		ı							
is changed	<i>1)</i>	Des M	oines							LIA STAT	E 🛦	_5	50321		 ZIP C	ODE		Ш
COMMITTEE'S E-MA	AIL ADDRES	SS																
(Check if a is changed		mwat	son@iowad	democra	ats.org					1 1								
		Optiona	al Second E-I	Mail Add	ress													. 1
COMMITTEE'S WEB (Check if a is changed	address	DRESS (I	URL)															
2. DATE 1	M / D 06		2020															
3. FEC IDENTIFIC	CATION NU	MBER	•	C co	0035600													
4. IS THIS STATEM	MENT _	NEV	W (N)	OR	×	AME	NDE) (A)										
I certify that I have e	examined thi	is Staten	nent and to th	he best o	of my kno	wledge	and	belief	it is	true	cor	ect a	nd co	omple	te.			
Type or Print Name	of Treasurer	Sagar	, Ken, , ,															
Signature of Treasure	er <i>Sagar</i> ,	Ken, , ,			[E	lectroni	cally F	iled]		ate		10	′ [13]′[20	Y
NOTE: Submission of			ncomplete info										he pe	nalties	of 2	U.S.C	. §43	37g.
Office Use Only					Fe To	or furthe ederal El ell Free 8 ecal 202-	ection (800-424	Commi -9530		tact:				EC Revise			1	

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	naidate	Committee:	
(a)	ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	ete the candidate
	ne of ndidate		
	ndidate ty Affiliati	Office on Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of ndidate		
Pa	rty Con	nmittee:	
(d)	×	CTA ' ' DEM '	Democratic, epublican, etc.) Party.
Pol	litical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	•
(f)	П	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg	regated fund or party
(.)	ш	committee. (i.e., nonconnected committee)	ogaioa iana oi party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joii	nt Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number C	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC Form 1	(Revised 02/2009) P	Page 3
Write or Type Comm	uittee Name	
IOWA DEI	MOCRATIC PARTY	
6. Name of Any Co	onnected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PA	C Sponsor
IOWA GRASSI Mailing Address Relationship:	ROOTS VICTORY FUND 2813 VIRGINIA PLACE DES MOINES CITY STATE ZIP Connected Organization Affiliated Committee X Joint Fundraising Representative Leadershi	ODE p PAC Sponsor
Custodian of Rec books and records	cords: Identify by name, address (phone number optional) and position of the person in possessions.	n of committee
Full Name		
Mailing Address		
Title or Position	CITY STATE ZIP CO	ODE
	Telephone number	
. Treasurer: List the any designated ag	e name and address (phone number optional) of the treasurer of the committee; and the name and jent (e.g., assistant treasurer).	d address of
Full Name of Treasurer	Sagar, Ken, , ,	
Mailing Address	5661 Fleur Drive	
	Des Moines IA 50321	
Title or Position	CITY STATE ZIP CC 515 _ 244 Telephone number	DDE _

FEC Form 1	1 (Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE ZIP (CODE
Title or Position	Telephone number	
safety deposit boxe Name of Bank, De	Depositories: List all banks or other depositories in which the committee deposits funds, holds access or maintains funds. Expository, etc.	zano, reno
safety deposit boxe Name of Bank, Dep	west Bank 3839 Merle Hay Road, Suite 190	
safety deposit boxe Name of Bank, De	West Bank 3839 Merle Hay Road, Suite 190 Des Moines IA 50310	
safety deposit boxe Name of Bank, De	Bes or maintains funds. Sepository, etc. West Bank 3839 Merle Hay Road, Suite 190 Des Moines IA 50310 CITY STATE ZIP	CODE
Safety deposit boxe Name of Bank, Deposit boxe Mailing Address Name of Bank, Deposit boxe Name of Bank, Deposit	Bes or maintains funds. Sepository, etc. West Bank 3839 Merle Hay Road, Suite 190 Des Moines IA 50310 CITY STATE ZIP	
Name of Bank, Department o	es or maintains funds. Spository, etc. West Bank 3839 Merle Hay Road, Suite 190 Des Moines CITY STATE ZIP Spository, etc. Bank of America	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number C STATE A ZIP CODE ▲ Telephone Number C Title OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Title OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Title OR Positiories: List all banks or other depositories in which the committee deposits funds, holds accounts, repository, etc. Mailing Address Talephone Number Title OR Positiories: List all banks or other depositories in which the committee deposits funds, holds accounts, repository, etc. Mailing Address Talephone Number Title OR Positiories: List all banks or other depositories in which the committee deposits funds, holds accounts, repository, etc. Mailing Address	(h). Joint Fundraisir	ng Participant:				
A. FEC ID number C	1			FEC ID	number	С
A grade of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sp. Finkenauer Victory Fund Mailing Address PO Box 598 Affiliated Committee Joint Fundraising Representative Leadership PAC esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY A STATE A ZIP CODE A Telephone Number Telephone Number Telephone Number Telephone Number Amalgamated Bank epository, etc. Mailing Address 1825 K Street, NW	2.			FEC ID	number	С
ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sp Finkenauer Victory Fund Mailing Address PO Box 598 Mailing Address PO Box 598 Mailing Address PO Box 598 CITY ▲ STATE ▲ ZIP CODE A Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Tolephone Number	3.			FEC ID	number	С
ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sp Finkenauer Victory Fund Mailing Address PO Box 598 Mailing Address PO Box 598 Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address Title OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Telephone Number Telephone Number Telephone Number Amalgamated Bank epositor, etc. Mailing Address [825 K Street, NW]				_ FEC ID	number	С
Finkenauer Victory Fund Mailing Address PO Box 598 Dubuque Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Telephone Number Telephone Number 1825 K Street, NW Mailing Address 1825 K Street, NW Mailing Address						
Mailing Address PO Box 598 Dubuque Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC lesignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TiTLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Telephone Number Telephone Number Amalgamated Bank lame of Bank, Amalgamated Bank lepository, etc. Mailing Address	lame of Any Connected	Organization, Affiliat	ted Committee, Joint F	undraising Rep	resentativ	e, or Leadership PAC Spon
Dubuque Relationship: CITY ▲ STATE ▲ ZIP CODE A Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE A Telephone Number — Telephone Number — Telephone Number — Amalgamated Bank epository, etc. Mailing Address	Finkenauer Victor	y Fund				
Dubuque Relationship: CITY ▲ STATE ▲ ZIP CODE A Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE A Telephone Number Telephone Number Telephone Number Amalgamated Bank epository, etc. Mailing Address	I					
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Relationship: CITY ▲ STATE ▲ ZIP CODE △ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE △ Telephone Number Telephone Number Telephone Number Amalgamated Bank epository, etc. Mailing Address 1825 K Street, NW Mailing Address						
Connected Organization		Dubuque			IA	52004
esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Telephone Number Telephone Number Amalgamated Bank epository, etc. 1825 K Street, NW Mailing Address	Relationship:		CITY A		STATE A	ZIP CODE ▲
Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number — — — — — — — — — — — — — — — — — — —					Representa	ative Leadership PAC Sp
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Telephone Number Telephone Number Amalgamated Bank Epository, etc. Mailing Address 1825 K Street, NW	Full Name					
TITLE OR POSITION CITY Telephone Number Tel						
TITLE OR POSITION CITY Telephone Number Tel	Mailing Address					
TITLE OR POSITION CITY Telephone Number Tel	Mailing Address					
anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rafety deposit boxes or maintains funds. Amalgamated Bank epository, etc. Mailing Address 1825 K Street, NW	Mailing Address					1
afety deposit boxes or maintains funds. ame of Bank, Amalgamated Bank epository, etc. Mailing Address 1825 K Street, NW					STATE A	
Washington						
	TITLE OR POSITION Sanks or Other Depositor afety deposit boxes or material depositions and the same of Bank, depository, etc.	pries: List all banks or aintains funds. amated Bank 1825 K Street, NW	CITY A	Telephone Nu	ee deposit	ZIP CODE S funds, holds accounts, ren

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

5(g) (or(h). Joint Fundraisin	g Participant:		
	1		FEC ID number C	
	2.		FEC ID number	
	3.		FEC ID number	
	4.		FEC ID number	
6.	Name of Any Connected Cindy Axne Victor	_	undraising Representative, or Leadership PAC	Sponsor
	Mailing Address	5825 Waterbury Circle		
		Des Moines	IA 50312	
	Relationship:	CITY ▲	STATE ▲ ZIP CODE	
	Connected	1 Organization Affiliated Committee	Joint Fundraising Representative Leadership P	AC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional		
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲ ZIP CODE	^
			Telephone Number	
9.	safety deposit boxes or ma	ries: List all banks or other depositories in whintains funds. amated Bank 275 Seventh Avenue	nich the committee deposits funds, holds accounts	s, rents
		New York	NY 10011	
		CITY A	STATE ▲ ZIP CODE	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
	1.	 	FEC ID number	
	2.		FEC ID number	
	3.		FEC ID number	
	4.		FEC ID number	
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative, o	or Leadership PAC Sponsor
	DNC State Party	Victory Fund		
		430 South Capitol Street		
	Mailing Address	430 30ttili Capitol Street		
		Washington	DC DC	20003
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee X Joint	Fundraising Representativ	e Leadership PAC Sponsor
0	Designated Asset Identifi	by name, address (phone number – optional)		
8.	Designated Agent: Identify	/ by name, address (bhone number – obtional)		
		, , ,		
	Full Name			
	Full Name			
	Full Name			
	Full Name	CITY	STATE A	ZIP CODE A
	Full Name	CITY A		ZIP CODE A
	Full Name	CITY A	STATE A	ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION	CITY CITY Te ries: List all banks or other depositories in which	STATE A	
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail	CITY CITY Te ries: List all banks or other depositories in which	STATE A	
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Jowa S	CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	CITY CITY Te ries: List all banks or other depositories in which aintains funds. State Bank	STATE A	
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	CITY CITY Te ries: List all banks or other depositories in which aintains funds. State Bank	STATE A	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** _____11___

h). Joint Fundraisin	g raiticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
Democratic Grass	sroots Victory Fund		
	430 South Capitol Street SE		
Mailing Address			
	Washington	DC DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected		Fundraising Representa	Leadership PAC Sp
Connected	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
Connected esignated Agent: Identify		Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify Full Name		Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify Full Name		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify	y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which saintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor deposit boxes or material deposition boxes or material depository, etc.	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

5(g) (or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	С
6.	Name of Any Connected Dollars for Democ	Organization, Affiliated Committee, Joint Fundrai	ising Representative	e, or Leadership PAC Sponsor
	Mailing Address	430 South Capitol Street, Suite 30		
		Washington	DC	20003
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connected		Fundraising Representa	
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tele	ephone Number	
9.	safety deposit boxes or many Name of Bank, Veridia		ne committee deposit	s funds, holds accounts, rents
	Depository, etc.	2005 Ingersoll		
	Mailing Address			
	Mailing Address			
	Mailing Address			
	Mailing Address	Des Moines	IA I	50309

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Connected Organization Affiliated Committee Joint Fundraising Representative Leads esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address	
3. FEC ID number C 4. FEC ID number C FEC ID number	
A. FEC ID number C ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership GREEN THE SENATE 2020 VICTORY FUND Mailing Address 600 PENNSYLVANIA AVE SE #15845 WASHINGTON Relationship: CITY ▲ STATE ▲ ZIF Connected Organization Affiliated Committee ★ Joint Fundraising Representative Leadership Leadership Connected Organization Affiliated Committee ★ Joint Fundraising Representative Leadership Connected Organization TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP Telephone Number	
ame of Any Connected Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership GREEN THE SENATE 2020 VICTORY FUND Mailing Address 600 PENNSYLVANIA AVE SE #15845 WASHINGTON Relationship: CITY ▲ STATE ▲ ZIF Connected Organization Affiliated Committee Joint Fundraising Representative Leadership	
Mailing Address 600 PENNSYLVANIA AVE SE #15845 WASHINGTON Relationship: CITY ▲ STATE ▲ ZIF Connected Organization Affiliated Committee Joint Fundraising Representative Leader PO Box 220 CITY ▲ STATE ▲ ZIF Telephone Number Title OR POSITION ▼ CITY ▲ STATE ▲ ZIP Telephone Number PO Box 220	
Mailing Address Mailing Address	p PAC Spoi
Mailing Address #15845 WASHINGTON CITY ▲ STATE ▲ ZIF Connected Organization Affiliated Committee Joint Fundraising Representative Leade Pesignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP Telephone Number Telephone Number Telephone Number Telephone Number Fundraising Representative Leade Position Number Telephone Number Telephone Number Telephone Number First Trust and Savings Bank Appository, etc. PO Box 220	
Mailing Address #15845 WASHINGTON CITY ▲ STATE ▲ ZIF Connected Organization Affiliated Committee Joint Fundraising Representative Leade Pesignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP Telephone Number Telephone Number Telephone Number Telephone Number Fundraising Representative Leade Position Number Telephone Number Telephone Number Telephone Number First Trust and Savings Bank Appository, etc. PO Box 220	
Mailing Address #15845 WASHINGTON CITY ▲ STATE ▲ ZIF Connected Organization Affiliated Committee Joint Fundraising Representative Leade Pesignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP Telephone Number Telephone Number Telephone Number Telephone Number Fundraising Representative Leade Position Number Telephone Number Telephone Number Telephone Number First Trust and Savings Bank Appository, etc. PO Box 220	
Relationship: CITY ▲ STATE ▲ ZIF Connected Organization Affiliated Committee Joint Fundraising Representative Leads esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP Telephone Number	
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leader Sesignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP Telephone Number	
Connected Organization	. 1–1 .
Connected Organization	CODE A
resignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP Telephone Number	analain DAO C
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP Telephone Number In the committee deposits funds, holds a fety deposit boxes or maintains funds. The positories in which the committee deposits funds, holds a fety deposit boxes or maintains funds. The positories in which the committee deposits funds, holds a fety deposit boxes or maintains funds. The pository is a state A Telephone Number	
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TITLE OR POSITION ▼ CITY ▲ Telephone Number	
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Telephone Number	CODE A
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fety deposit boxes or maintains funds. The property deposit boxes or maintains funds. First Trust and Savings Bank Pository, etc. PO Box 220	accounts. rer
epository, etc. PO Box 220	
Mailing Address PO Box 220	
WHEATLAND IA 52777	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisin				D number	
1.					
2.			FEC II	D number	С
3.			FEC II	D number	C
4.			FEC II	D number	C
ame of Any Connected	Organization, Affiliate	d Committee, Joint	Fundraising Re	presentativ	e, or Leadership PAC Spor
RITA HART VICT	ORY FUND				
Mailing Address	2764 130TH				
	WHEATLAND			L IA	52777
Relationship:		CITY ▲		STATE A	ZIP CODE ▲
Connected	Organization Affil	iated Committee	Joint Fundraisin	a Represent	ative Leadership PAC S
			Joint Fundraisin	g Represent	ative Leadership PAC S
Connected esignated Agent: Identify Full Name				g Represent	Leadership PAC S
esignated Agent: Identify				g Represent	Leadership PAC S
esignated Agent: Identify				g Represent	Leadership PAC S
esignated Agent: Identify	by name, address (pr	none number – option	nal)		
esignated Agent: Identify	by name, address (ph	none number – option	nal)	g Represent	
esignated Agent: Identify Full Name	by name, address (ph	none number – option	nal)	STATE A	
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor of the deposit boxes or maintenance.	by name, address (ph	none number – option	Telephone N	STATE A	
Full Name	by name, address (ph	none number – option	Telephone N	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor of the deposite boxes or main arms of Bank,	by name, address (ph	none number – option	Telephone N	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor aftety deposit boxes or material depositions are of Bank, epository, etc.	by name, address (ph	none number – option	Telephone N	STATE A	ZIP CODE A