

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**JONI FOR IOWA**

**A.** Full Name (Last, First, Middle Initial)  
**COLLINS, HENRY, L., , III**

Mailing Address P.O. BOX 237

City VERBANK	State NY	Zip Code 12585-0237
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FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2975.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		06		2020

Transaction ID : SA11A.232585

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED; SEE  
REDESIGNATION

**B.** Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
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FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2942729.71

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		12		2020

Transaction ID : SA11C.22357828713

Amount of Each Receipt this Period

75.00

☒ Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

**C.** Full Name (Last, First, Middle Initial)  
**HAMILTON, STEPHANIE, , ,**

Mailing Address 182 LUCIA CT

City JUPITER	State FL	Zip Code 33478-5470
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FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AESTHETICSOccupation  
PA-C

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

395.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		06		2020

Transaction ID : SA11A.232586

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

175.00

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