

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

IOWANS FOR ASHLEY WOLFTORNABANE

ADDRESS (number and street)

522 TERRENCE ST

Check if different
than previously
reported. (ACC)

STORM LAKE

IA

50588

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00909499

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

IA

04

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

☒ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ Termination Report (TER)(b) 12-Day **PRE**-Election Report for the:☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y
2026

through

M M /

D D /

Y Y Y Y
2026*I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.*

Type or Print Name of Treasurer WOLFTORNABANE, ASHLEY, , ,

Signature of Treasurer

WOLFTORNABANE, ASHLEY, , ,

Date

M M /

D D /

Y Y Y Y
2026

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

IOWANS FOR ASHLEY WOLFTORNABANE

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	2	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	8886.00	17407.92
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	8886.00	17407.92
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	4920.67	11836.93
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	4920.67	11836.93
8. Cash on Hand at Close of Reporting Period (from Line 27).....	5570.99	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

IOWANS FOR ASHLEY WOLFTORNABANE

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2026

To:

MM / DD / YYYY
03 / 31 / 2026**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

2884.00

6444.00

(ii) Unitemized

4002.00

8963.92

(iii) TOTAL of contributions
from individuals ▶

6886.00

15407.92

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

2000.00

2000.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

8886.00

17407.92

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

8886.00

17407.92

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4920.67	11836.93
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	4920.67	11836.93

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1605.66
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8886.00
25. SUBTOTAL (add Line 23 and Line 24).....	10491.66
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4920.67
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5570.99

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)

PAGE 5 OF 30

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

Carr, Chris and Heather, , ,

A.

Mailing Address 805 W. 3rd Street

City

Aurelia

State

IA

Zip Code

51005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prairie Lakes AEA

Occupation

SLP

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 15 2026

Transaction ID : SA11AI.4635

Amount of Each Receipt this Period

300.00

☐ Memo Item

Earmarked: ActBlue deposit 401862839

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6180.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 15 2026

Transaction ID : SA11AI.4635.0

Amount of Each Receipt this Period

300.00

☒ Memo Item

Total earmarked through conduit. Limit not affected.

Full Name (Last, First, Middle Initial)

Cone, Cindy, , ,

C.

Mailing Address 761 610th St

City

Storm Lake

State

IA

Zip Code

50588

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 18 2026

Transaction ID : SA11AI.4698

Amount of Each Receipt this Period

100.00

☐ Memo Item

Earmarked: ActBlue deposit 401901722

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

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

400.00

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

PAGE 6 OF 30

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7968.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		22		2026

Transaction ID : SA11AI.4698.0

Amount of Each Receipt this Period

100.00

☒ Memo Item

Total earmarked through conduit. Limit not affected.

Full Name (Last, First, Middle Initial)

Daniels, Di, , ,

B.

Mailing Address 1624 W 6th St

City

Storm Lake

State

IA

Zip Code

50588

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

NA

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		22		2026

Transaction ID : SA11AI.4748

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Depew, Jerry, , ,

C.

Mailing Address 16595 450th St

City

Laurens

State

IA

Zip Code

50554

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Self

Farmer

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

885.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		19		2026

Transaction ID : SA11AI.4764

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

700.00

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

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

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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

Ginella, Alex, , ,

A.

Mailing Address 302 S. 49th St

City

Omaha

State

NE

Zip Code

68132

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	2	6

Transaction ID : SA11AI.4617

Amount of Each Receipt this Period

100.00



Memo Item

Earmarked: ActBlue deposit 401848662

B.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5670.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	2	6

Transaction ID : SA11AI.4617.0

Amount of Each Receipt this Period

100.00



Memo Item

Total earmarked through conduit. Limit not affected.

C.

Full Name (Last, First, Middle Initial)

Ginella, Alex, , ,

Mailing Address 302 S. 49th St

City

Omaha

State

NE

Zip Code

68132

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	2	6

Transaction ID : SA11AI.4618

Amount of Each Receipt this Period

100.00



Memo Item

Earmarked: ActBlue deposit 401848662

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

200.00

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

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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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 01 2026

Transaction ID : SA11AI.4618.0

Amount of Each Receipt this Period

100.00

☒ Memo Item

Total earmarked through conduit. Limit not affected.

Full Name (Last, First, Middle Initial)

Ginella, Alex, , ,

B.

Mailing Address 302 S. 49th St

City

Omaha

State

NE

Zip Code

68132

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Not Employed

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 11 2026

Transaction ID : SA11AI.4690

Amount of Each Receipt this Period

25.00

☐ Memo Item

Earmarked: ActBlue deposit 401895947

Full Name (Last, First, Middle Initial)

ACTBLUE

C.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7432.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 15 2026

Transaction ID : SA11AI.4690.0

Amount of Each Receipt this Period

25.00

☒ Memo Item

Total earmarked through conduit. Limit not affected.

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

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

25.00

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

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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

Harry, Tal, , ,

A.

Mailing Address 575 Aspen Road

City

Kamas

State

UT

Zip Code

84036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 26 / 2026

Transaction ID : SA11AI.4717

Amount of Each Receipt this Period

750.00

☐ Memo Item

Earmarked: ActBlue deposit 401910613

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

9093.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 29 / 2026

Transaction ID : SA11AI.4717.0

Amount of Each Receipt this Period

750.00

☒ Memo Item

Total earmarked through conduit. Limit not affected.

Full Name (Last, First, Middle Initial)

Havens, Margaret, , ,

C.

Mailing Address 912 Clover Lane

City

Storm Lake

State

IA

Zip Code

50588

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

436.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 17 / 2026

Transaction ID : SA11AI.4642

Amount of Each Receipt this Period

100.00

☐ Memo Item

Earmarked: ActBlue deposit 401869638

SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

850.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 30

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6425.00

Date of Receipt

M M / D D / Y Y Y Y
02 22 2026

Transaction ID : SA11AI.4642.0

Amount of Each Receipt this Period

100.00

☒ Memo Item

Total earmarked through conduit. Limit not affected.

Full Name (Last, First, Middle Initial)

Havens, Margaret, , ,

B.

Mailing Address 912 Clover Lane

City

Storm Lake

State

IA

Zip Code

50588

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Not Employed

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

536.00

Date of Receipt

M M / D D / Y Y Y Y
03 20 2026

Transaction ID : SA11AI.4703

Amount of Each Receipt this Period

100.00

☐ Memo Item

Earmarked: ActBlue deposit 401901722

Full Name (Last, First, Middle Initial)

ACTBLUE

C.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8158.00

Date of Receipt

M M / D D / Y Y Y Y
03 22 2026

Transaction ID : SA11AI.4703.0

Amount of Each Receipt this Period

100.00

☒ Memo Item

Total earmarked through conduit. Limit not affected.

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

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

100.00

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)

PAGE 11 OF 30

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

Heisterkamp, Rodney, , ,

Mailing Address 1532 Duff Ave

City
Ames

State
IA

Zip Code
50010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
IT Consultant

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 04 2026

Transaction ID : SA11AI.4659

Amount of Each Receipt this Period

25.00

☐ Memo Item

Earmarked: ActBlue deposit 401888189

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City
SOMERVILLE

State
MA

Zip Code
02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6625.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 08 2026

Transaction ID : SA11AI.4659.0

Amount of Each Receipt this Period

25.00

☒ Memo Item

Total earmarked through conduit. Limit not affected.

Full Name (Last, First, Middle Initial)

Phillips, Maribeth, , ,

Mailing Address 1201 Office Park Road APT 2007

City
West Des Moines

State
IA

Zip Code
50265

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Employed

Occupation
Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

624.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 04 2026

Transaction ID : SA11AI.4672

Amount of Each Receipt this Period

24.00

☐ Memo Item

Earmarked: ActBlue deposit 401888189

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

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

49.00

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)

PAGE 12 OF 30

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7032.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 08 2026

Transaction ID : SA11AI.4672.0

Amount of Each Receipt this Period

24.00

☒ Memo Item

Total earmarked through conduit. Limit not affected.

Full Name (Last, First, Middle Initial)

Phillips, Maribeth, , ,

B.

Mailing Address 1201 Office Park Road APT 2007

City

West Des Moines

State

IA

Zip Code

50265

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Not Employed

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

674.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 25 2026

Transaction ID : SA11AI.4712

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmarked: ActBlue deposit 401910613

Full Name (Last, First, Middle Initial)

ACTBLUE

C.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8318.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 29 2026

Transaction ID : SA11AI.4712.0

Amount of Each Receipt this Period

50.00

☒ Memo Item

Total earmarked through conduit. Limit not affected.

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

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

50.00

**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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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

Quesnell, Rebecca, , ,

A.

Mailing Address 1116 Maywood Dr

City

Storm Lake

State

IA

Zip Code

50588

FEC ID number of contributing
federal political committee.

C

Name of Employer

TransAgra

Occupation

Scientist

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	2	6

Transaction ID : SA11AI.4680

Amount of Each Receipt this Period

200.00



Memo Item

Earmarked: ActBlue deposit 401888189

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

7292.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	6

Transaction ID : SA11AI.4680.0

Amount of Each Receipt this Period

200.00



Memo Item

Total earmarked through conduit. Limit not affected.

Full Name (Last, First, Middle Initial)

Rossow, Amber, , ,

C.

Mailing Address 1312 8th Avenue North,

City

Fort Dodge

State

IA

Zip Code

50501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	9		2	0	2	6

Transaction ID : SA11AI.4605

Amount of Each Receipt this Period

20.00



Memo Item

Earmarked: ActBlue deposit 401824557

SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

220.00

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

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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	2	6

Transaction ID : SA11AI.4605.0

Amount of Each Receipt this Period

20.00

☒ Memo Item

Total earmarked through conduit. Limit not affected.

B.

Full Name (Last, First, Middle Initial)

Rossow, Amber, , ,

Mailing Address 1312 8th Avenue North,

City

Fort Dodge

State

IA

Zip Code

50501

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Not Employed

Not Employed

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	9		2	0	2	6

Transaction ID : SA11AI.4623

Amount of Each Receipt this Period

20.00

☐ Memo Item

Earmarked: ActBlue deposit 401862839

C.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5740.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	2	6

Transaction ID : SA11AI.4623.0

Amount of Each Receipt this Period

20.00

☒ Memo Item

Total earmarked through conduit. Limit not affected.

SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

20.00

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

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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

Rossow, Amber, , ,

A.

Mailing Address 1312 8th Avenue North,

City

Fort Dodge

State

IA

Zip Code

50501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		09		2026

Transaction ID : SA11AI.4687

Amount of Each Receipt this Period

20.00

☐ Memo Item

Earmarked: ActBlue deposit 401895947

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7357.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		15		2026

Transaction ID : SA11AI.4687.0

Amount of Each Receipt this Period

20.00

☒ Memo Item

Total earmarked through conduit. Limit not affected.

Full Name (Last, First, Middle Initial)

Schweller, Kenneth, , ,

C.

Mailing Address 233 South Shore Dr

City

Storm Lake

State

IA

Zip Code

50588

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ape Cognition and Conservation

Occupation

Head Programmer

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		27		2026

Transaction ID : SA11AI.4777

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

270.00

2884.00

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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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

MELTON FOR IOWA

A.

Mailing Address PO BOX 36

City

WEBSTER CITY

State

IA

Zip Code

50595

FEC ID number of contributing
federal political committee.

C C00802827

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 09 2026

Transaction ID : SA11C.4790

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

2000.00

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

2000.00

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

A. ACTBLUE

Mailing Address PO BOX 441146

City
SOMERVILLEState
MAZip Code
02144Purpose of Disbursement
Service fee for DD 401821149

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2026

FEC Identification Number

C C00401224

Amount of Each Disbursement this Period

1.39

Transaction ID : SB17.4939

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ACTBLUE

Mailing Address PO BOX 441146

City
SOMERVILLEState
MAZip Code
02144Purpose of Disbursement
Service fee for DD 401824557

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		11		2026

FEC Identification Number

C C00401224

Amount of Each Disbursement this Period

2.58

Transaction ID : SB17.4940

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ACTBLUE

Mailing Address PO BOX 441146

City
SOMERVILLEState
MAZip Code
02144Purpose of Disbursement
Service Fee for dd 401833249

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		18		2026

FEC Identification Number

C C00401224

Amount of Each Disbursement this Period

2.97

Transaction ID : SB17.4941

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6.94

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

A. ACTBLUE

Mailing Address PO BOX 441146

City
SOMERVILLEState
MAZip Code
02144Purpose of Disbursement
Service Fee for DD 401840294

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	5		2	0	2	6

FEC Identification Number

C C00401224

Amount of Each Disbursement this Period

3.37

Transaction ID : SB17.4942

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ACTBLUE

Mailing Address PO BOX 441146

City
SOMERVILLEState
MAZip Code
02144Purpose of Disbursement
Service fee for DD 401848662

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	2	6

FEC Identification Number

C C00401224

Amount of Each Disbursement this Period

8.89

Transaction ID : SB17.4944

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ACTBLUE

Mailing Address PO BOX 441146

City
SOMERVILLEState
MAZip Code
02144Purpose of Disbursement
Service Fee for DD 401858513

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	8		2	0	2	6

FEC Identification Number

C C00401224

Amount of Each Disbursement this Period

0.99

Transaction ID : SB17.4945

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

13.25

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

A. ACTBLUE

Mailing Address PO BOX 441146

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		15		2026

City
SOMERVILLEState
MAZip Code
02144

FEC Identification Number

C	C00401224
---	-----------

Purpose of Disbursement
Service Fee for DD 401862839

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

18.60

Transaction ID : SB17.4946

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. ACTBLUE

Mailing Address PO BOX 441146

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		22		2026

City
SOMERVILLEState
MAZip Code
02144

FEC Identification Number

C	C00401224
---	-----------

Purpose of Disbursement
Service Fee for DD 401869638

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

9.29

Transaction ID : SB17.4947

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. ACTBLUE

Mailing Address PO BOX 441146

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2026

City
SOMERVILLEState
MAZip Code
02144

FEC Identification Number

C	C00401224
---	-----------

Purpose of Disbursement
Service Fee for 401878917

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

6.94

Transaction ID : SB17.4948

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

34.83

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

A. ACTBLUE

Mailing Address PO BOX 441146

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	6

City
SOMERVILLEState
MAZip Code
02144

FEC Identification Number

C	C00401224
---	-----------

Purpose of Disbursement
Service Fee for DD 401888189

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

29.14

Transaction ID : SB17.4949

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. ACTBLUE

Mailing Address PO BOX 441146

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	6

City
SOMERVILLEState
MAZip Code
02144

FEC Identification Number

C	C00401224
---	-----------

Purpose of Disbursement
Service Fee for DD 401895947

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

19.57

Transaction ID : SB17.4950

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. ACTBLUE

Mailing Address PO BOX 441146

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	2		2	0	2	6

City
SOMERVILLEState
MAZip Code
02144

FEC Identification Number

C	C00401224
---	-----------

Purpose of Disbursement
Service Fee for DD 401901722

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

12.89

Transaction ID : SB17.4952

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

61.60

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

--

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

A. ACTBLUE

Mailing Address PO BOX 441146

City
SOMERVILLEState
MAZip Code
02144Purpose of Disbursement
Service Fee for DD 401910613

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	6

FEC Identification Number

C C00401224

Amount of Each Disbursement this Period

50.79

Transaction ID : SB17.4953

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ACTBLUE

Mailing Address PO BOX 441146

City
SOMERVILLEState
MAZip Code
02144Purpose of Disbursement
Service Fee for DD 401916361

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

FEC Identification Number

C C00401224

Amount of Each Disbursement this Period

4.94

Transaction ID : SB17.4954

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Casey's

Mailing Address 1 SE Convenience Blvd

City
AnkenyState
IAZip Code
50021Purpose of Disbursement
travel (fuel)

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

18.73

Transaction ID : SB17.4794

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

74.46

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

A. Casey's

Mailing Address 1 SE Convenience Blvd

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	2	6

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel (fuel)

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

22.56

Transaction ID : SB17.4811

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Casey's

Mailing Address 1 SE Convenience Blvd

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	2	6

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel (fuel)

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

32.02

Transaction ID : SB17.4812

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Casey's

Mailing Address 1 SE Convenience Blvd

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	2	6

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel (fuel)

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

28.14

Transaction ID : SB17.4814

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

82.72

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

A. Casey's

Mailing Address 1 SE Convenience Blvd

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	2	6

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel (fuel)

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

31.33

Transaction ID : SB17.4815

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Casey's

Mailing Address 1 SE Convenience Blvd

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	2	6

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel (fuel)

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

26.66

Transaction ID : SB17.4817

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Casey's

Mailing Address 1 SE Convenience Blvd

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	2	6

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel (fuel)

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

32.69

Transaction ID : SB17.4819

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

90.68

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

A. Casey's

Mailing Address 1 SE Convenience Blvd

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	2		2	0	2	6

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel (fuel)

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

35.95

Transaction ID : SB17.4820

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Casey's

Mailing Address 1 SE Convenience Blvd

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	6

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel (fuel)

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

27.27

Transaction ID : SB17.4822

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Casey's

Mailing Address 1 SE Convenience Blvd

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	2	6

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel (fuel)

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

37.24

Transaction ID : SB17.4823

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

100.46

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

A. Casey's

Mailing Address 1 SE Convenience Blvd

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	2	6

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel (fuel)

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

38.52

Transaction ID : SB17.4824

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Casey's

Mailing Address 1 SE Convenience Blvd

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	2	6

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel (fuel)

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

34.30

Transaction ID : SB17.4827

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Casey's

Mailing Address 1 SE Convenience Blvd

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	2	6

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel (fuel)

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

21.88

Transaction ID : SB17.4839

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

94.70

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

A. Casey's

Mailing Address 1 SE Convenience Blvd

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	2	6

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
fuel (travel)

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

48.35

Transaction ID : SB17.4840

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Casey's

Mailing Address 1 SE Convenience Blvd

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	6

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
fuel (travel)

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

42.69

Transaction ID : SB17.4844

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Casey's

Mailing Address 1 SE Convenience Blvd

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	2	6

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel (fuel)

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

32.92

Transaction ID : SB17.4843

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

123.96

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

A. CE Print + promo

Mailing Address 2700 Bell Ave

City
Des MoinesState
IAZip Code
50321Purpose of Disbursement
Walk Cards

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

772.54

Transaction ID : SB17.4810

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CE Print + promo

Mailing Address 2700 Bell Ave

City
Des MoinesState
IAZip Code
50321Purpose of Disbursement
campaign literature

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1086.05

Transaction ID : SB17.4828

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ian MacDonald Studios

Mailing Address 8660 Cherry Lane

City
WestminsterState
COZip Code
80031Purpose of Disbursement
graphic design

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.4842

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1908.59

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

A. Record Printing & Copy Center

Mailing Address 1117 Villa Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2026

City
Sioux CityState
IAZip Code
52203

FEC Identification Number

C

Purpose of Disbursement
Yard SignsCategory/
Type

Amount of Each Disbursement this Period

1451.72

Transaction ID : SB17.4826

☐ Memo Item

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Toskr, Inc. (Get Thru)Mailing Address 1330 Broadway
Floor 3

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2026

City
OaklandState
CAZip Code
94612

FEC Identification Number

C

Purpose of Disbursement
campaign textingCategory/
Type

Amount of Each Disbursement this Period

292.98

Transaction ID : SB17.4832

☐ Memo Item

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Walmart

Mailing Address 1831 Lake Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		22		2026

City
Storm LakeState
IAZip Code
50588

FEC Identification Number

C

Purpose of Disbursement
clipboards, pens, printer ink, paperCategory/
Type

Amount of Each Disbursement this Period

60.03

Transaction ID : SB17.4804

☐ Memo Item

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

1804.73

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

A. Walmart

Mailing Address 1831 Lake Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2026

City
Storm LakeState
IAZip Code
50588

FEC Identification Number

C

Purpose of Disbursement
tripod and car phone mountCategory/
Type

Amount of Each Disbursement this Period

53.21

Transaction ID : SB17.4825

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

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

53.21

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

4518.32