

# **SCHEDULE A (FEC Form 3X)** **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 ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Federal: Iowa Democratic Party**

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

**A. Johnson, Justin, , ,**

Mailing Address 6810 Spring Creek Dr

City  
Bettendorf

State  
IA

Zip Code  
52722-6425

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Genesis Health System

Occupation (for Individual)  
Physician

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2019

**Transaction ID : 3591373**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Kasmer, Donna, , ,**

Mailing Address 6018 Madrid Ct

City  
Palmdale

State  
CA

Zip Code  
93552-4014

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 23 / 2019

**Transaction ID : 3618282**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Kelley, Shirley, B, ,**

Mailing Address 810 Lakeshore Dr

City  
Lakeside

State  
IA

Zip Code  
50588-7670

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 23 / 2019

**Transaction ID : 3618157**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00