

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

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

FOR LINE NUMBER: PAGE 14 OF 22

(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. RIGTERINK, GEORGE, H., MR.,

Mailing Address 356 POND VIEW DRIVE

City  
DEVONState  
PAZip Code  
19333-1732FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2017

Transaction ID : SA11A.83215

Amount of Each Receipt this Period

13400.00

☐ Memo Item  
CONTRIBUTION

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

B. STANARD, JAMES, N., MR.,

Mailing Address P.O. BOX 14309

City  
CLEVELANDState  
OHZip Code  
44114-0309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
T/W MANAGEMENT, INC.Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2017

Transaction ID : SA11A.83216

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

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

C. BANKE, BARBARA, R., MS.,

Mailing Address 1045 ALEXANDER MOUNTAIN RD

City  
GEYSERVILLEState  
CAZip Code  
95441-9315FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JACKSON FAMILY WINESOccupation (for Individual)  
CHARIMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2017

Transaction ID : SA11A.83226

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

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

33400.00

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