

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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<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)
TENNEY, DUNCAN, , ,

Mailing Address 26 W. CHEYENNE MTN. BLVD.

City COLORADO SPRINGS	State CO	Zip Code 80906-4335
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FEC ID number of contributing federal political committee. **C**

Name of Employer D V & E	Occupation EXECUTIVE
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Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11A.176962

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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
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Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2062995.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2020

Transaction ID : SA11C.17399516393

Amount of Each Receipt this Period

250.00

☒ Memo Item
CONTRIBUTION
SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

C. Full Name (Last, First, Middle Initial)
VAN KURAN, LAWRENCE, , ,

Mailing Address 6378 JAMIESON AVE.

City ENCINO	State CA	Zip Code 91316-6414
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FEC ID number of contributing federal political committee. **C**

Name of Employer KAISER FOUNDATION HOSPITALS, INC.	Occupation EXECUTIVE DIRECTOR
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Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11A.176963

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

500.00

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