

**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
06 / 02 / 2026in the
State of

IA

(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
04 / 01 / 2026

through

M M / D D / Y Y Y Y
05 / 13 / 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
05 / 21 / 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	4		0	1		2	0	2	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		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))	5140.40	22548.32
(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))	5140.40	22548.32
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	2205.95	14042.88
(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))	2205.95	14042.88
8. Cash on Hand at Close of Reporting Period (from Line 27)	8505.44	
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:

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

To:

M M / D D / Y Y Y Y
05 / 13 / 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).....

1945.00

8389.00

(ii) Unitemized

3195.40

12159.32

(iii) TOTAL of contributions
from individuals ▶

5140.40

20548.32

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

2000.00

(d) The Candidate

0.00

0.00

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

5140.40

22548.32

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)..... ▶

5140.40

22548.32

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.....	2205.95	14042.88
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) ►	2205.95	14042.88

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5570.99
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5140.40
25. SUBTOTAL (add Line 23 and Line 24).....	10711.39
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2205.95
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	8505.44

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

PAGE 5 OF 19

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

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)

Baxter, Jacob, , ,

Mailing Address 317 West 3rd Street

City

Storm Lake

State

IA

Zip Code

50588

FEC ID number of contributing
federal political committee.

C

Name of Employer

Buena Vista Regional Medical Center

Occupation

Information Technology

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
05 04 2026

Transaction ID : SA11AI.5034

Amount of Each Receipt this Period

100.00

☐ Memo Item

Earmarked: ActBlue deposit 401962774

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 ▼

11076.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 10 2026

Transaction ID : SA11AI.5034.0

Amount of Each Receipt this Period

100.00

☒ Memo Item

Total earmarked through conduit. Limit not affected.

Full Name (Last, First, Middle Initial)

Fleshner, Pat, L, ,

Mailing Address 214 S 20th
Apt 205

City

Denison

State

IA

Zip Code

51442

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

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
04 20 2026

Transaction ID : SA11AI.5091

Amount of Each Receipt this Period

250.00

☐ Memo Item

350.00

SUBTOTAL of Receipts This Page (optional)..... ▶**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 PageFOR LINE NUMBER:
(check only one)

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

Havens, Margaret, , ,

A.

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 ▼

636.00

Date of Receipt

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

Transaction ID : SA11AI.5028

Amount of Each Receipt this Period

100.00



Memo Item

Earmarked: ActBlue deposit 401953695

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 ▼

10907.00

Date of Receipt

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

Transaction ID : SA11AI.5028.0

Amount of Each Receipt this Period

100.00



Memo Item

Total earmarked through conduit. Limit not affected.

Full Name (Last, First, Middle Initial)

Heisterkamp, Rodney, , ,

C.

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 ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.4961

Amount of Each Receipt this Period

25.00



Memo Item

Earmarked: ActBlue deposit 401924177

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

125.00

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
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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 ▼

9708.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 05 2026

Transaction ID : SA11AI.4961.0

Amount of Each Receipt this Period

25.00

☒ Memo Item

Total earmarked through conduit. Limit not affected.

Full Name (Last, First, Middle Initial)

Heisterkamp, Rodney, , ,

B.

Mailing Address 1532 Duff Ave

City

Ames

State

IA

Zip Code

50010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

IT Consultant

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 04 2026

Transaction ID : SA11AI.5030

Amount of Each Receipt this Period

25.00

☐ Memo Item

Earmarked: ActBlue deposit 401962774

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 ▼

10947.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 10 2026

Transaction ID : SA11AI.5030.0

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 RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

Louscher, Christine, G, ,

A.

Mailing Address 308 Robinson Dr

City

Algona

State

IA

Zip Code

50511

FEC ID number of contributing
federal political committee.

C

Name of Employer
self employed

Occupation
non-profit org management prof

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 11 2026

Transaction ID : SA11AI.5127

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Oppedal Paschen, Cynthia, , ,

B.

Mailing Address 2117 Graeber St

City

Ames

State

IA

Zip Code

50014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Webster City Daily Freeman-Jou

Occupation

Journalist

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 13 2026

Transaction ID : SA11AI.5142

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Peterson, Rick, , ,

C.

Mailing Address 320 E 2nd

City

Storm Lak

State

IA

Zip Code

50588

FEC ID number of contributing
federal political committee.

C

Name of Employer

NA

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.5058

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

850.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

IOWANS FOR ASHLEY WOLFTORNABANE

Full Name (Last, First, Middle Initial)

Peterson, Rick, , ,

A.

Mailing Address 320 E 2nd

City

Storm Lak

State

IA

Zip Code

50588

FEC ID number of contributing
federal political committee.

C

Name of Employer

NA

Occupation

Retired

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

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

Transaction ID : SA11AI.5135

Amount of Each Receipt this Period

500.00



Memo Item

B.

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 ▼

679.00

Date of Receipt

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

Transaction ID : SA11AI.5014

Amount of Each Receipt this Period

5.00



Memo Item

Earmarked: ActBlue deposit 401945832

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 ▼

10617.00

Date of Receipt

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

Transaction ID : SA11AI.5014.0

Amount of Each Receipt this Period

5.00



Memo Item

Total earmarked through conduit. Limit not affected.

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

505.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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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)

Phillips, Maribeth, , ,

A.

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 ▼

704.00

Date of Receipt

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

Transaction ID : SA11AI.5035

Amount of Each Receipt this Period

25.00



Memo Item

Earmarked: ActBlue deposit 401962774

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 ▼

11101.00

Date of Receipt

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

Transaction ID : SA11AI.5035.0

Amount of Each Receipt this Period

25.00



Memo Item

Total earmarked through conduit. Limit not affected.

C.

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 ▼

729.00

Date of Receipt

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

Transaction ID : SA11AI.5053

Amount of Each Receipt this Period

25.00



Memo Item

Earmarked: ActBlue deposit 401967982

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

50.00

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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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 ▼

11336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 13 2026

Transaction ID : SA11AI.5053.0

Amount of Each Receipt this Period

25.00

☒ Memo Item

Total earmarked through conduit. Limit not affected.

Full Name (Last, First, Middle Initial)

Rossow, Amber, , ,

B.

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 ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 09 2026

Transaction ID : SA11AI.4971

Amount of Each Receipt this Period

20.00

☐ Memo Item

Earmarked: ActBlue deposit 401929267

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 ▼

9947.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 12 2026

Transaction ID : SA11AI.4971.0

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 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)

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 09 2026

Transaction ID : SA11AI.5039

Amount of Each Receipt this Period

20.00

☐ Memo Item

Earmarked: ActBlue deposit 401962774

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 ▼

11176.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 10 2026

Transaction ID : SA11AI.5039.0

Amount of Each Receipt this Period

20.00

☒ Memo Item

Total earmarked through conduit. Limit not affected.

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)..... ▶

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

20.00

1945.00

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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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 DD401924177

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	2	6

FEC Identification Number

C C00401224

Amount of Each Disbursement this Period

9.86

Transaction ID : SB17.5294

☐ 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 401929267

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	2	6

FEC Identification Number

C C00401224

Amount of Each Disbursement this Period

11.69

Transaction ID : SB17.5295

☐ 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 401939683

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	2	6

FEC Identification Number

C C00401224

Amount of Each Disbursement this Period

2.97

Transaction ID : SB17.5293

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

24.52

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. ACTBLUE

Mailing Address PO BOX 441146

Date of Disbursement

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

City
SOMERVILLEState
MAZip Code
02144

FEC Identification Number

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

Purpose of Disbursement
Service fee for DD

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

24.37

Transaction ID : SB17.5292

☐ 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	5		0	3		2	0	2	6

City
SOMERVILLEState
MAZip Code
02144

FEC Identification Number

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

Purpose of Disbursement
Service fee for DD 401953695

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

4.75

Transaction ID : SB17.5291

☐ 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	5		1	0		2	0	2	6

City
SOMERVILLEState
MAZip Code
02144

FEC Identification Number

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

Purpose of Disbursement
Service fee for DD 401962774

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

12.24

Transaction ID : SB17.5290

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

41.36

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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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 401967982

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C C00401224

Amount of Each Disbursement this Period

6.15

Transaction ID : SB17.5289

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Casey's

Mailing Address 1 SE Convenience Blvd

City
AnkenyState
IAZip Code
50021Purpose of Disbursement
travel expenses- fuel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

14.60

Transaction ID : SB17.5209

☐ 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 expenses- fuel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

49.03

Transaction ID : SB17.5206

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

69.78

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. Casey's

Mailing Address 1 SE Convenience Blvd

Date of Disbursement

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

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel expenses- fuel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

36.39

Transaction ID : SB17.5191

☐ 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	4		2	6		2	0	6	

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel expenses- fuel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

25.25

Transaction ID : SB17.5187

☐ 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	4		2	8		2	0	6	

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel expenses- fuel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

48.77

Transaction ID : SB17.5181

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

110.41

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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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
04		30		2026

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel expenses - fuel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

46.88

Transaction ID : SB17.5175

☐ 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
05		02		2026

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel expenses - fuel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

21.97

Transaction ID : SB17.5176

☐ 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
05		03		2026

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel expenses - fuel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

59.99

Transaction ID : SB17.5168

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

128.84

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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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
05		05		2026

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel expenses - fuel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

53.40

Transaction ID : SB17.5164

☐ 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
05		10		2026

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel expenses - fuel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

37.40

Transaction ID : SB17.5159

☐ 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
05		11		2026

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel expenses - fuel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

29.65

Transaction ID : SB17.5158

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

120.45

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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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	5		1	2		2	0	2	6

City
AnkenyState
IAZip Code
50021

FEC Identification Number

C

Purpose of Disbursement
travel expenses- fuel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

42.63

Transaction ID : SB17.5208

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Raygun

Mailing Address 505 E Grand Ave

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	2	6

City
Des MoinesState
IAZip Code
50309

FEC Identification Number

C

Purpose of Disbursement
campaign shirts

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

226.20

Transaction ID : SB17.5207

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

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

Date of Disbursement

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

City
OaklandState
CAZip Code
94612

FEC Identification Number

C

Purpose of Disbursement
Campaign texting

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

36.78

Transaction ID : SB17.5180

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

305.61

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

800.97