

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
ERNST VICTORY IOWA

ADDRESS (number and street) **PO BOX 93441**
 Check if different than previously reported. (ACC) **DES MOINES IA 50393**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00610428 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on **11 / 03 / 2020** in the State of **IA**
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on **/ /** in the State of

5. Covering Period **10 / 01 / 2020** through **10 / 14 / 2020**

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
HOBBS, CABELL, , ,
Type or Print Name of Treasurer

Signature of Treasurer **HOBBS, CABELL, , ,** [Electronically Filed] Date **10 / 22 / 2020**

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

ERNST VICTORY IOWA

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		46377.57
(b) Cash on Hand at Beginning of Reporting Period.....	241799.85	
(c) Total Receipts (from Line 19)	216740.00	1583378.30
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	458539.85	1629755.87
7. Total Disbursements (from Line 31).....	2179.05	1173395.07
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	456360.80	456360.80
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	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

Write or Type Committee Name

ERNST VICTORY IOWA

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 01 / 2020 To: M M / D D / Y Y Y Y Y Y
10 / 14 / 2020

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	211450.00	1530706.67
(ii) Unitemized	3990.00	19870.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	215440.00	1550576.67
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	1300.00	32800.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	216740.00	1583376.67
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	1.63
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	216740.00	1583378.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	216740.00	1583378.30

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	2179.05	106996.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2179.05	106996.07
22. Transfers to Affiliated/Other Party Committees.....	0.00	1040800.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	25599.00
(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 28(a), (b), and (c)).....	0.00	25599.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2179.05	1173395.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2179.05	1173395.07

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	216740.00	1583376.67
34. Total Contribution Refunds (from Line 28(d))	0.00	25599.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	216740.00	1557777.67
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2179.05	106996.07
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2179.05	106996.07

**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)	PAGE 6 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 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)
ERNST VICTORY IOWA

A. ANGELO, ALFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 NORTH AVENUE EAST
 City CRANFORD State NJ Zip Code 07016-2461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANGELO & O'BRIEN P.A. Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372610
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. BROWN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600 111TH STREET
 City URBAN DALE State IA Zip Code 50322-3820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOB BROWN'S CHEVORLET Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372594
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BROWN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600 111TH STREET
 City URBAN DALE State IA Zip Code 50322-3820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOB BROWN'S CHEVORLET Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372595
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 7 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. BROWN, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3600 111TH STREET

City URBANDALE	State IA	Zip Code 50322-3820
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BOB BROWN'S CHEVORLET	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2020

Transaction ID : SA11A.372596

Amount of Each Receipt this Period
3000.00

Memo Item
CONTRIBUTION

B. CAPPEL, JENNIFER, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5604 CENTER ST

City WEST DES MOINES	State IA	Zip Code 50266-7215
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OWNERS	Occupation (for Individual) CAPPEL'S ACE HARDWARE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2020

Transaction ID : SA11A.372619

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. CROOKHAM, JOE, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 808

City OSKALOOSA	State IA	Zip Code 52577-0808
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PRESIDENT/ OWNER	Occupation (for Individual) MUSCO LIGHTING
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2020

Transaction ID : SA11A.372625

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 8 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. DAWSON, CATHERINE, S.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 526 MALL DR
 City SCHAUMBURG State IL Zip Code 60173-5104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372621
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. DAWSON, HANLEY, , , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 526 MALL DR
 City SCHAUMBURG State IL Zip Code 60173-5104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372626
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. DE YAGER, PETER, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1223 BROWN STREET
 City HULL State IA Zip Code 51239-7328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE FOREIGN CANDY COMPANY, INC. Occupation (for Individual) CORPORATE EXECUTIVE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372343
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 35
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. DEAN, JAMES, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 COLONIAL ST
 City SIOUX CENTER State IA Zip Code 51250-2950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERSOVA MANAGEMENT CO Occupation (for Individual) AGRIBUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372612
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. DOWNING, D., ROBERT, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8489 HIGHWAY 65-69
 City INDIANOLA State IA Zip Code 50125-9444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOWNING CONSTRUCTION, INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372618
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. EDEKER, DAWN, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2815 100TH ST
 City URBANDALE State IA Zip Code 50322-3860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372622
 Amount of Each Receipt this Period 2800.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5550.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 10 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. EDEKER, RANDY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2815 100TH ST
 City URBANDALE State IA Zip Code 50322-3860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HYVEE INC Occupation (for Individual) CHAIRMAN, CEO AND PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372623
 Amount of Each Receipt this Period 2800.00
 Memo Item CONTRIBUTION

B. HALEY, DAVID, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 ALTA DR
 City FORT WORTH State TX Zip Code 76107-1526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HBK CAPITAL MANAGEMENT Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372597
 Amount of Each Receipt this Period 2800.00
 Memo Item CONTRIBUTION

C. HALEY, LORI, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 ALTA DR
 City FORT WORTH State TX Zip Code 76107-1526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372587
 Amount of Each Receipt this Period 2800.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8400.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 11 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. HANAWALT, MARK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 161 AUGUSTA LN
 City WAVERLY State IA Zip Code 50677-9258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITED EQUIPMENT ACCESSORIES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372620
 Amount of Each Receipt this Period 2800.00
 Memo Item CONTRIBUTION

B. HANSEN, CAROLINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1469 GLEN OAKS DR
 City WEST DES MOINES State IA Zip Code 50266-6630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IOWA SELECT FARMS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372591
 Amount of Each Receipt this Period 15000.00
 Memo Item CONTRIBUTION

C. HANSEN, CAROLINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1469 GLEN OAKS DR
 City WEST DES MOINES State IA Zip Code 50266-6630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IOWA SELECT FARMS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372591_B
 Amount of Each Receipt this Period 2200.00
 Memo Item TRANSFER TO NON-FEDERAL ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	17800.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 12 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. HANSEN, DEBRA, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1469 GLEN OAKS DR
 City WEST DES MOINES State IA Zip Code 50266-6630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IOWA SELECT FARMS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372598
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. HANSEN, JEFF, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1469 GLEN OAKS DR
 City WEST DES MOINES State IA Zip Code 50266-6630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IOWA SELECT FARMS, L.P. Occupation (for Individual) PRESIDENT/C.E.O.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372590
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. HANSEN, MICHAEL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36774 HIGH MEADOWS LN
 City CUMMING State IA Zip Code 50061-4422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IOWA SELECT FARMS Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372592
 Amount of Each Receipt this Period 15000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	25000.00
TOTAL This Period (last page this line number only).....▶	

**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)	PAGE 13 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. HANSEN, MICHAEL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36774 HIGH MEADOWS LN
 City CUMMING State IA Zip Code 50061-4422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IOWA SELECT FARMS Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372592_B
 Amount of Each Receipt this Period 2200.00
 Memo Item
TRANSFER TO NON-FEDERAL ACCOUNT

B. JOHNSON, NATALIE, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1316 BURR OAKS DR
 City WEST DES MOINES State IA Zip Code 50266-6616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372588
 Amount of Each Receipt this Period 15000.00
 Memo Item
CONTRIBUTION

C. JOHNSON, NATALIE, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1316 BURR OAKS DR
 City WEST DES MOINES State IA Zip Code 50266-6616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372588_B
 Amount of Each Receipt this Period 2200.00
 Memo Item
TRANSFER TO NON-FEDERAL ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 14 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. MCCONNELL, LARRY, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 311 E 1ST AVENUE

City INDIANOLA	State IA	Zip Code 50125-2623
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
10 / 01 / 2020
Transaction ID : SA11A.372615

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. ROGERS, RICHARD, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16251 DALLAS PKWY

City ADDISON	State TX	Zip Code 75001-6801
-----------------	-------------	------------------------

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

Name of Employer (for Individual) MARY KAY COSMETICS	Occupation (for Individual) CHAIRMAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2800.00

Date of Receipt
10 / 01 / 2020
Transaction ID : SA11A.372593

Amount of Each Receipt this Period
2800.00

Memo Item
CONTRIBUTION

C. SCHEWE, KARL, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 910 BLAIRS FERRY ROAD

City MARION	State IA	Zip Code 52302-3107
----------------	-------------	------------------------

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

Name of Employer (for Individual) ADM	Occupation (for Individual) SAFETY & SECURITY MANAGER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 01 / 2020
Transaction ID : SA11A.372617

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4050.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 15 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. YMKER, JOHN, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2722 390TH ST.
 City SIOUX CENTER State IA Zip Code 51250-7577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11A.372616
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. DERDERIAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 PRINCE GEORGE STREET
 City ANNAPOLIS State MD Zip Code 21401-1724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE STANTON PARK GROUP Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 10 / 07 / 2020
Transaction ID : SA11A.373239
 Amount of Each Receipt this Period 2100.00
 Memo Item CONTRIBUTION

C. ROSENTHAL-PERSONAL, BILLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address SUITE 200, 600 E EXCHANGE AVE
 City FT. WORTH State TX Zip Code 76164-8246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 07 / 2020
Transaction ID : SA11A.373240
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3600.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 16 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. GERSON, ELOISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 10696
 City CHICAGO State IL Zip Code 60610-0696
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 08 / 2020
Transaction ID : SA11A.390890
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. SCRIVNER, DOUGLAS, , MR. ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25461 FREMONT ROAD
 City LOS ALTOS HILLS State CA Zip Code 94022-3538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 08 / 2020
Transaction ID : SA11A.391052
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. WILSON , GARY , L. , MR. ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11500 ORUM ROAD
 City LOS ANGELES State CA Zip Code 90049-1737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PRIVATE INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 10 / 08 / 2020
Transaction ID : SA11A.391051
 Amount of Each Receipt this Period 2800.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	9800.00
TOTAL This Period (last page this line number only).....▶	

**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)	PAGE 17 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. BALL, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 NEW BRITAIN RD
 City DOYLESTOWN State PA Zip Code 18901-2642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BURPEE SEED Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391697
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. BERNAU, THOMAS, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 GRAND AVE
 City WEST DES MOINES State IA Zip Code 50265-3565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BERNAU CAPITAL PARTNERS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391690
 Amount of Each Receipt this Period 2800.00
 Memo Item CONTRIBUTION

C. BIRD, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 640 TAYLOR ST STE 2400
 City FORT WORTH State TX Zip Code 76102-4846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JETTA OPERATING CO. Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391732
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	13800.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 18 OF 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. BIRD, LAURA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 640 TAYLOR ST STE 2400
 City FORT WORTH State TX Zip Code 76102-4846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JETTA OPERATING CO. Occupation (for Individual) CONSTRUCTION MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391730
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. BOMGAARS, ANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 62
 City ORANGE CITY State IA Zip Code 51041-0062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391721
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BOONE, DOUG, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 338 7TH ST NE
 City SIOUX CENTER State IA Zip Code 51250-1748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PREMIER COMMUNICATIONS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391716
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4000.00
TOTAL This Period (last page this line number only)..... ▶

**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)	PAGE 19 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. BROWN, CURTIS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 918 BAILEYANA ROAD
 City HILLSBOROUGH State CA Zip Code 94010-6108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) D & J CONSTRUCTION Occupation (for Individual) INDUSTRIAL ELECTRONICS TECHNICAL
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 700.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391724
 Amount of Each Receipt this Period 700.00
 Memo Item CONTRIBUTION

B. BUCKINGHAM, JEFFREY, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41814 BOSTON AVENUE
 City MACEDONIA State IA Zip Code 51549-4146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391723
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CAMPBELL, JEANETTE, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1209 E EUCLID AVE
 City INDIANOLA State IA Zip Code 50125-1635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDIANOLA COMMUNITY SCHOOLS Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391695
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1450.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 20 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. COOPER, JOHNSON, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 AUGUSTA
 City ST SIMONS ISLAND State GA Zip Code 31522-2438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CSI HOLDINGS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391698
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. CRUMRINE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1061 COLONIAL ST.
 City SIOUX CENTER State IA Zip Code 51250-2954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTERSTATES CONSTRUCTION SERVICES Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391711
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

C. CUMMINS, CHARLES, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 98
 City FONRTANELLE State IA Zip Code 50845-0098
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391726
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6250.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 21 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. EVERIST, BRIAN, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5049 WORNALL RD 4A
 City KANSAS CITY State MO Zip Code 64112-2530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTERCONTINENTAL ENGINEERING CORP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391704
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. FULLMER, JAMES, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2552 WALNUT AVE STE 110
 City TUSTIN State CA Zip Code 92780-6991
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391728
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. GORSCH, DAVID, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6825 R63 HWY
 City INDIANOLA State IA Zip Code 50125-8592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORTEVA INC Occupation (for Individual) ASSOCIATE GENERAL COUNSEL
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391689
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 22 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. HAAHR, JAMES, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 216 CASINO RD
 City STORM LAKE State IA Zip Code 50588-7766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST FEDERAL SAVINGS BANK Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391718
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. HANEY, BRENDA, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1820 S 9TH LN
 City WEST DES MOINES State IA Zip Code 50265-8336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEE & C FARMS LLC Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391693
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. HENNINGSEN, MICHAEL, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 407
 City ATLANTIC State IA Zip Code 50022-0407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HENNINGSEN CONSTRUCTION INC Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391722
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 23 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. KEOUGH, NICOLETTE, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4135 PLUMWOOD DR.
 City WEST DES MOINES State IA Zip Code 50265-5388
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391719
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. LAW, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 307
 City WALL State SD Zip Code 57790-0307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOLDEN WEST TELECOM Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391720
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MACGOWAN, DEBORAH, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2100 WASHINGTON ST
 City SAN FRANCISCO State CA Zip Code 94109-2845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391702
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6500.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 24 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. MOUW, DARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 5TH ST NE
 City SIOUX CENTER State IA Zip Code 51250-1635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOUW MOTOR CO INC Occupation (for Individual) AUTO-TRUCK DEALERSHIP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391706
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. NICHOLS, LILLIAN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 243
 City FONTANELLE State IA Zip Code 50846-0243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391725
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PARKS, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2021-A CORPORATE DR
 City WILMINGTON State NC Zip Code 28405-7401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE PARKS COMPANY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391692
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10500.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 25 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. PETERSON, GALE, M.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 BLACKHAWK STREET
 City REINBECK State IA Zip Code 50669-1012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PETERSON CONTRACTORS INC Occupation (for Individual) CO-OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391696
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. PETERSON, SCOTT, RICHARD, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 995 COLONIAL ST
 City SIOUX CENTER State IA Zip Code 51250-2953
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTERSTATES Occupation (for Individual) C.E.O.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391705
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. PRESTAGE, WILLIAM, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 COHARIE DR
 City CLINTON State NC Zip Code 28328-3014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRESTAGE FARMS, INC. Occupation (for Individual) OWNER/PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391703
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8500.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 26 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. RASMUSSEN, CYNTHIA, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1717 GLENLEVEN TERR

City WEST DES MOINES	State IA	Zip Code 50266-6687
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2020

Transaction ID : SA11A.391700

Amount of Each Receipt this Period
2800.00

Memo Item
CONTRIBUTION

B. RASMUSSEN, STEPHEN, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1717 GLENLEVEN TERR

City WEST DES MOINES	State IA	Zip Code 50266-6687
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) ALLIED INSURANCE GROUP	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2020

Transaction ID : SA11A.391731

Amount of Each Receipt this Period
2800.00

Memo Item
CONTRIBUTION

C. SAUNDERS, JOHN, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4040 MACARTHUR BLVD SUITE 300

City NEWPORT BEACH	State CA	Zip Code 92660-2500
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) SAUNDERS PROPERTY CO	Occupation (for Individual) REAL ESTATE INVESTOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2020

Transaction ID : SA11A.391691

Amount of Each Receipt this Period
2800.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8400.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 27 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. SCHURMAN , ABBIE , M. , MRS. ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11620 210TH AVENUE
 City MILO State IA Zip Code 50166-6620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US BANK Occupation (for Individual) WEALTH MANAGEMENT TRUST ADV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391083
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SYBESMA, LES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 803 2ND AVE NE
 City SIOUX CENTER State IA Zip Code 51250-2040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PREMIER COMMUNICATIONS Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391713
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. TE STROETE, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1204 3RD AVE SW
 City SIOUX CENTER State IA Zip Code 51250-1200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PREMIER COMMUNICATIONS Occupation (for Individual) MARKETING & SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11A.391714
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

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)	PAGE 28 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. TILLMAN, TRENT, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5075 DEER VIEW ROAD

City CEDAR RAPIDS	State IA	Zip Code 52411-7869
----------------------	-------------	------------------------

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

Name of Employer (for Individual) TRUENORTH	Occupation (for Individual) INSURANCE BROKERAGE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2020

Transaction ID : SA11A.391084

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. VANDERPOOL, MARYLEE, N.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10205 HWY 92

City INDIANOLA	State IA	Zip Code 50125-7005
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2020

Transaction ID : SA11A.391727

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. WALKER, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1867 230TH ST

City RED OAK	State IA	Zip Code 51566-6018
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2020

Transaction ID : SA11A.391694

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 29 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. CHRISTENSEN, MARY ANN, MARTIN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23077 223RD AVENUE
 City SLEEPY EYE State MN Zip Code 56085-4133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 10 / 13 / 2020
Transaction ID : SA11A.392879
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. COHEN, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10405 SANDRINGHAM COURT
 City POTOMAC State MD Zip Code 20854-1901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDERAL HEALTH COUNSEL Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 13 / 2020
Transaction ID : SA11A.392863
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION
 REFUND TO BE ISSUED

C. HOLLANDER, YOSSIE, , MR. ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 BLUE HERON
 City IRVINE State CA Zip Code 92603-0307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JACADA Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5600.00

Date of Receipt 10 / 13 / 2020
Transaction ID : SA11A.392784
 Amount of Each Receipt this Period 5600.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	16600.00
TOTAL This Period (last page this line number only).....	

**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)	PAGE 30 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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. ANNETT, HARROLD, W., MR.,			Date of Receipt
Mailing Address P.O. BOX 1774			<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2020"/>
City DES MOINES	State IA	Zip Code 50306-1774	Transaction ID : SA11A.393027
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10000.00"/>
Name of Employer (for Individual) TMC TRANSPORTATION		Occupation (for Individual) CHAIRMAN & CEO	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BAIER, BARBARA, , MRS.,			Date of Receipt
Mailing Address 62837 SEATTLE RD			<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2020"/>
City GRISWOLD	State IA	Zip Code 51535-6629	Transaction ID : SA11A.393028
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DENNIS, COLLEEN, K., MRS.,			Date of Receipt
Mailing Address 5400 COUNTRY CLUB BLVD			<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2020"/>
City SIOUX CITY	State IA	Zip Code 51104-1003	Transaction ID : SA11A.393029
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="500.00"/>
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="10750.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**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)	PAGE 31 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. HAWKINS, CHRISTOPHER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1502 RIDGEWOOD AVE
 City OMAHA State NE Zip Code 68124-1317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAWKINS CONSTRUCTION Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 14 / 2020
Transaction ID : SA11A.393026
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. JOHNSON, KAREN, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14902 COYOTE CIR
 City URBANDALE State IA Zip Code 50323-1200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 14 / 2020
Transaction ID : SA11A.393025
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MCKEE, VERONICA, S., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 67657 730TH ST
 City MASSENA State IA Zip Code 50853-8147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GRISWOLD SCHOOLS Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 14 / 2020
Transaction ID : SA11A.393032
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2750.00
TOTAL This Period (last page this line number only).....	

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)	PAGE 32 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WISE, KELLY, , ,

Mailing Address P.O. BOX 8

City ATLANTIC	State IA	Zip Code 50022-0008
------------------	-------------	------------------------

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

Name of Employer (for Individual) WISE MOTELS, INC	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2020

Transaction ID : SA11A.393031

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-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).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	211450.00

**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)	PAGE 33 OF 35
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

A. NATSO PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1330 BRADDOCK PLACE
SUITE 501

City ALEXANDRIA State VA Zip Code 22314-1650

FEC ID number of contributing federal political committee. **C** C00097865

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 07 / 2020

Transaction ID : SA11C.391107

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. GRUNDY CO. REPUBLICAN CENTRAL COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX

City GRUNDY CENTER State IA Zip Code 60638-

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 14 / 2020

Transaction ID : SA11C.393011

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	1300.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
ERNST VICTORY IOWA

Full Name (Last, First, Middle Initial)
A. ANEDOT INC

Mailing Address 1340 POYDRAS STREET STE 1770

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 02 / 2020

FEC Identification Number: C

Transaction ID : **SB21B001**

Amount of Each Disbursement this Period: 1247.35

Memo Item

Full Name (Last, First, Middle Initial)
B. ANEDOT INC

Mailing Address 1340 POYDRAS STREET STE 1770

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 06 / 2020

FEC Identification Number: C

Transaction ID : **SB21B002**

Amount of Each Disbursement this Period: 408.60

Memo Item

Full Name (Last, First, Middle Initial)
C. ANEDOT INC

Mailing Address 1340 POYDRAS STREET STE 1770

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 08 / 2020

FEC Identification Number: C

Transaction ID : **SB21B003**

Amount of Each Disbursement this Period: 3.40

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1659.35

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ERNST VICTORY IOWA

Full Name (Last, First, Middle Initial) A. ANEDOT INC		Date of Disbursement MM / DD / YYYY 10 / 13 / 2020
Mailing Address 1340 POYDRAS STREET STE 1770		FEC Identification Number C [] Transaction ID : SB21B004 Amount of Each Disbursement this Period [] 460.70
City NEW ORLEANS	State LA	Zip Code 70112
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ANEDOT INC		Date of Disbursement MM / DD / YYYY 10 / 14 / 2020
Mailing Address 1340 POYDRAS STREET STE 1770		FEC Identification Number C [] Transaction ID : SB21B005 Amount of Each Disbursement this Period [] 59.00
City NEW ORLEANS	State LA	Zip Code 70112
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY [] / [] / []
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []
City	State	Zip Code
Purpose of Disbursement		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 519.70
TOTAL This Period (last page this line number only).....▶	[] 2179.05