

**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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. DEAN, JAMES, R., ,			Date of Receipt
Mailing Address 601 COLONIAL ST			<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2020"/>
City SIOUX CENTER	State IA	Zip Code 51250-2950	Transaction ID : SA11A.372612
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Name of Employer (for Individual) VERSOVA MANAGEMENT CO		Occupation (for Individual) AGRIBUSINESS	<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="2500.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DOWNING, D., ROBERT, MR.,			Date of Receipt
Mailing Address 8489 HIGHWAY 65-69			<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2020"/>
City INDIANOLA	State IA	Zip Code 50125-9444	Transaction ID : SA11A.372618
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) DOWNING CONSTRUCTION, INC		Occupation (for Individual) PRESIDENT	<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. EDEKER, DAWN, , MRS.,			Date of Receipt
Mailing Address 2815 100TH ST			<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2020"/>
City URBANDALE	State IA	Zip Code 50322-3860	Transaction ID : SA11A.372622
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="2800.00"/>
Name of Employer (for Individual) HOMEMAKER		Occupation (for Individual) HOMEMAKER	<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="2800.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="5550.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>