

**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 |
|-----------------------------|-----------------------------|-----------------------------|

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. 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)..... | |