



Filing ID #10079972

FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • B81 Cannon Building • Washington, DC 20515

FILER INFORMATION

Name: Ashley Wolftornabane
Status: Congressional Candidate
State/District: IA04

FILING INFORMATION

Filing Type: Candidate Report
Filing Year: 2026
Filing Date: 06/07/2026
Period Covered: 01/01/2025– 04/15/2026

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
Whole Life Insurance [WU] DESCRIPTION: Spouse's whole life insurance through State Farm	SP	\$1,001 - \$15,000	None		
403(b) ⇒ 403(b) [OT] DESCRIPTION: 403(b) employer retirement plan managed by TIAA	SP	\$15,001 - \$50,000	None		

* Investment Vehicle details available at the bottom of this form. For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
Metropolitan Community College COMMENTS: Current year amount is until 5/15/2026	Spouse Salary	\$31,557.71	\$74,945.88

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
SP	US Department of Education	Several loans from DoE between 8/2012 & 8/2016	Student Loans for bachelor's degree	\$50,001 - \$100,000

SCHEDULE E: POSITIONS

None disclosed.

SCHEDULE F: AGREEMENTS

None disclosed.

SCHEDULE J: COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

None disclosed.

SCHEDULE A INVESTMENT VEHICLE DETAILS

- 403(b) (Owner: SP)
DESCRIPTION: Employment retirement plan through TIAA.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

Trusts: Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?
☐ Yes ☒ No

Exemption: Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?
☐ Yes ☒ No

COMMENTS

CERTIFICATION AND SIGNATURE

☒ I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.
Digitally Signed: Ashley Wolftornabane , 06/07/2026