

**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 44
	<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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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)
MasterCard International Inc. Employees' PAC

Full Name (Last, First, Middle Initial)
A. Michael Ellison

Mailing Address 2000 Purchase St

City Purchase	State NY	Zip Code 10577-2405
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FEC ID number of contributing federal political committee. **C**

Name of Employer MasterCard	Occupation VP/Financial Analysis
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2015
Transaction ID : 20151012-99-10-52

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Tom Fauth

Mailing Address 311 Briartree Ln

City Saint Louis	State MO	Zip Code 63129-5015
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FEC ID number of contributing federal political committee. **C**

Name of Employer MasterCard	Occupation Business Leader, Business Analysis
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2015
Transaction ID : 487FAE7F64C2A8C6F836

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Gary Flood

Mailing Address 2000 Purchase St

City Purchase	State NY	Zip Code 10577-2405
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FEC ID number of contributing federal political committee. **C**

Name of Employer MasterCard	Occupation EVP/Customer Group
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1664.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2015
Transaction ID : 20151012-64-10-52

Amount of Each Receipt this Period
416.00

SUBTOTAL of Receipts This Page (optional).....▶	566.00
TOTAL This Period (last page this line number only).....▶	