

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

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

FOR LINE NUMBER: PAGE 55 OF 142

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

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

A. Jordan, Daniel, G, ,

Mailing Address 151 N Franklin St

City
ChicagoState
ILZip Code
60606-1915FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Continental Casualty CompanyOccupation (for Individual)
AVP, Claims Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2019

Transaction ID : 20191119575-30

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Jordan, Daniel, G, ,

Mailing Address 151 N Franklin St

City
ChicagoState
ILZip Code
60606-1915FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Continental Casualty CompanyOccupation (for Individual)
AVP, Claims Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2019

Transaction ID : 201912109455-30

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. Kaas, John, , ,

Mailing Address 100 W Matsonford Rd
Three Radnor Corporate Center, SteCity
RadnorState
PAZip Code
19087-4558FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Continental Casualty CompanyOccupation (for Individual)
SVP, Branch Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2019

Transaction ID : 2019071710375-105

Amount of Each Receipt this Period

125.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

175.00

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