

# **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)

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

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NAME OF COMMITTEE (In Full)

**National Association of Insurance and Financial Advisors Political Action Comm**

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

**A. Cranfield, David, , Mr.,**

Mailing Address 130 Azure View Ct

City  
Maineville

State  
OH

Zip Code  
45039-7225

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Pinney Insurance Center

Occupation (for Individual)  
Brokerage Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 10 / 2019

**Transaction ID : 16941524**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Levasseur, Thomas, F., Mr.,**

Mailing Address 8 Harvest Dr

City  
Dover

State  
NH

Zip Code  
03820-4959

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Beacon Retirement Group

Occupation (for Individual)  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 10 / 2019

**Transaction ID : 16941534**

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

**C. Gray, Michael, William, Mr.,**

Mailing Address 4401 NW Honeysuckle

City  
Corvallis

State  
OR

Zip Code  
97330-3356

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Northwest Financial Group, LLC

Occupation (for Individual)  
Managing Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 10 / 2019

**Transaction ID : 16941540**

Amount of Each Receipt this Period

42.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

109.00