

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

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

FOR LINE NUMBER: PAGE 8 OF 19

(check only one)

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

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NAME OF COMMITTEE (In Full)

CLEVELAND-CLIFFS INC. POLITICAL ACTION COMMITTEE (CliffsPAC)

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

A. Carlson, Paul, , ,

Mailing Address P.O. Box 589

City
HibbingState
MNZip Code
55746FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cleveland-Cliffs Inc.Occupation (for Individual)
Sr. Area Manager - Plant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

765.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2019

Transaction ID : SA11AI.22544

Amount of Each Receipt this Period

90.00

☐ Memo Item

Per Month

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

B. Cartella, David T., , ,

Mailing Address 200 Public Square
Suite 3300City
ClevelandState
OHZip Code
44114FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cleveland-Cliffs Inc.Occupation (for Individual)
VP, Global Envir Affair & Cnsl

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2019

Transaction ID : SA11AI.22501

Amount of Each Receipt this Period

100.00

☐ Memo Item

Per Month

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

C. Cebula, Robert, C., ,

Mailing Address 200 Public Square

City
ClevelandState
OHZip Code
44114FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cleveland-Cliffs Inc.Occupation (for Individual)
VP, Corp Contoller & CAO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2019

Transaction ID : SA11AI.22502

Amount of Each Receipt this Period

100.00

☐ Memo Item

Per Month

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

290.00

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