

# **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)

**CLEVELAND-CLIFFS INC. POLITICAL ACTION COMMITTEE (CliffsPAC)**

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

**A. Siegal, Michael, , ,**

Mailing Address 200 Public Square

City  
Cleveland

State  
OH

Zip Code  
44114

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Cleveland-Cliffs Inc.

Occupation (for Individual)  
Director

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 / 31 / 2019

**Transaction ID : SA11AI.22553**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Per Month

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

**B. Smith, Clifford, T., ,**

Mailing Address 200 Public Square  
Suite 3300

City  
Cleveland

State  
OH

Zip Code  
44114

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Cleveland-Cliffs Inc.

Occupation (for Individual)  
SVP - Global Business Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

**Transaction ID : SA11AI.22521**

Amount of Each Receipt this Period

200.00

☐ Memo Item

Per Month

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

**C. Stevens, Brian, , ,**

Mailing Address 811 Madison Avenue  
7th Floor

City  
Toledo

State  
OH

Zip Code  
43604

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IronUnits LLC (CCI)

Occupation (for Individual)  
Senior Process Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

**Transaction ID : SA11AI.22493**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Per Month

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

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

1230.00