

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

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

FOR LINE NUMBER: PAGE 28 OF 115

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Institute of Certified Public Accountants Political Action Committee

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

A. Bishop, Jonathan, L., ,

Mailing Address 13697 WHITEBIRD PL

City
EAST WENATCHEE

State
WA

Zip Code
98802-8522

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CliftonLarsonAllen LLP

Occupation (for Individual)
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 15 / 2019

Transaction ID : 43145141

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

B. Kleinhans, Evelyn, A, ,

Mailing Address 301 SW Adams St Ste 1000

City
PEORIA

State
IL

Zip Code
61602-1557

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CliftonLarsonAllen LLP

Occupation (for Individual)
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 15 / 2019

Transaction ID : 43145142

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

C. Jones, Roger, Clay, ,

Mailing Address 5550 Wild Rose LN Ste 300

City
West Des Moines

State
IA

Zip Code
50266-5351

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CliftonLarsonAllen LLP

Occupation (for Individual)
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 15 / 2019

Transaction ID : 43145143

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

900.00