

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

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

FOR LINE NUMBER: PAGE 13 OF 151

(check only one)

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

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NAME OF COMMITTEE (In Full)

ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)

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

A. BLAHA, GEORGE, V., ,

Mailing Address 60 KENSINGTON OVAL

City
ROCKY RIVER

State
OH

Zip Code
44116

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE BOLI GROUP

Occupation (for Individual)
PRESIDENT

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
01 / 08 / 2019

Transaction ID : AE36000B21B9D48379B6

Amount of Each Receipt this Period

2000.00

☐ Memo Item
CONTRIBUTION

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

B. BOOK, MICHAEL, , ,

Mailing Address 28 CRAWFORD RD.

City
WESTPORT

State
CT

Zip Code
06880-1824

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LENOX ADVISORS

Occupation (for Individual)
MANAGING PARTNER

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
04 / 05 / 2019

Transaction ID : A37A96AE68E074D4BB40

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

C. BORROWMAN, JERRY, , ,

Mailing Address 1436 E BELLA VIE CT

City
SALT LAKE CTY

State
UT

Zip Code
84121

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PENN MUTUAL LIFE INSURANCE

Occupation (for Individual)
PRESIDENT, AS&PD

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 21 / 2019

Transaction ID : ADB4CA5B214A84C50861

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

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

3250.00