

# **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)

**Deloitte Political Action Committee**

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

**A. Chambers, Fiona, M., ,**

Mailing Address 127 Public Sq  
Ste 3300

City  
Cleveland

State  
OH

Zip Code  
44114-1291

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Deloitte Tax LLP

Occupation (for Individual)  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
09 / 16 / 2019

**Transaction ID : 2019091910415-1168**

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

**B. Chambers, Kevin, , ,**

Mailing Address 711 E Monument Ave

City  
Dayton

State  
OH

Zip Code  
45402-1320

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Deloitte Consulting LLP

Occupation (for Individual)  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
09 / 16 / 2019

**Transaction ID : 2019091910415-2179**

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

**C. Chamtieh, Rachid, M., ,**

Mailing Address 695 Town Center Dr  
Ste 1000

City  
Costa Mesa

State  
CA

Zip Code  
92626-1924

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Deloitte & Touche LLP

Occupation (for Individual)  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
09 / 16 / 2019

**Transaction ID : 2019091910415-1169**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

450.00