

# **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)

**International Paper Political Action Committee (IP-PAC)**

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

**A. Ward, Paul, D, ,**

Mailing Address 315 Travailler Rd

City  
Lafayette

State  
LA

Zip Code  
70506-6425

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
International Paper

Occupation (for Individual)  
EHS Representative IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2019

**Transaction ID : 202001010177-786**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**B. Ward, Suzanne, T, ,**

Mailing Address 807 Shiloh Dr

City  
Columbus

State  
MS

Zip Code  
39702-3145

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
International Paper

Occupation (for Individual)  
Supervisor Purchasing III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2019

**Transaction ID : 202001010177-1802**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**C. Warren, Christopher, N, ,**

Mailing Address 1761 Highway 153

City  
Castor

State  
LA

Zip Code  
71016-4272

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
International Paper

Occupation (for Individual)  
Maintenance Reliability Leader III

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  
12 / 31 / 2019

**Transaction ID : 202001010177-984**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

65.00