

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

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

FOR LINE NUMBER: PAGE 10 OF 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

ASHLAND LLC POLITICAL ACTION COMMITTEE FOR EMPLOYEES (PACE)

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

A. GOSWELL, JOHN, P, ,

Mailing Address 15 GLENRIDGE PARKWAY

City
MONTCLAIR

State
NJ

Zip Code
07042

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ASHLAND LLC

Occupation (for Individual)
VICE PRESIDENT INTERNAL AUDIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 05 / 2019

Transaction ID : B000187S000015L11A1

Amount of Each Receipt this Period

30.00

☐ Memo Item
PAYROLL DEDUCTION

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

B. GOSWELL, JOHN, P, ,

Mailing Address 15 GLENRIDGE PARKWAY

City
MONTCLAIR

State
NJ

Zip Code
07042

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ASHLAND LLC

Occupation (for Individual)
VICE PRESIDENT INTERNAL AUDIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2019

Transaction ID : B000188S000015L11A1

Amount of Each Receipt this Period

30.00

☐ Memo Item
PAYROLL DEDUCTION

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

C. GREGG, SCOTT, A, ,

Mailing Address 5695 MASTERS ROW

City
MAINEVILLE

State
OH

Zip Code
45039

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ASHLAND LLC

Occupation (for Individual)
VICE PRESIDENT TAX

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 05 / 2019

Transaction ID : B000187S000017L11A1

Amount of Each Receipt this Period

25.00

☐ Memo Item
PAYROLL DEDUCTION

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

85.00

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