

# **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)

**MasterCard International Inc. Employees' PAC**

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

**A. Kesselring, Teresa, , ,**

Mailing Address 2200 Mastercard Blvd

City  
O Fallon

State  
MO

Zip Code  
63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

MasterCard

Occupation (for Individual)

Senior Vice President, Service Deliver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 15 / 2019

**Transaction ID : 2019101016135-161**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Khanna, Joe, , ,**

Mailing Address 2000 Purchase St

City  
Purchase

State  
NY

Zip Code  
10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

MasterCard

Occupation (for Individual)

Business Leader, Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 15 / 2019

**Transaction ID : 2019101016135-137**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. Kies, Sam, , ,**

Mailing Address 100 Manhattanville Rd

City  
Purchase

State  
NY

Zip Code  
10577-2134

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

MasterCard

Occupation (for Individual)

Leader, Management Associate (MBA)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 15 / 2019

**Transaction ID : 2019101016135-43**

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)..... ►

225.00