

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)

PAGE 6 OF 8

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. American First Policies, Inc.

Mailing Address 1400 Crystal Drive
Suite 850

City
Arlington

State
VA

Zip Code
22202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4277.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2017

Transaction ID : SA11AI.4120

Amount of Each Receipt this Period

4277.00

☐ Memo Item

In-kind - payroll/office expenses

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

B. Weiser, Ronald, , ,

Mailing Address 320 N. MAIN STREET
Ste 200

City

Ann Arbor

State
MI

Zip Code
48104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mckinley Associates

Occupation (for Individual)
Founder

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 17 / 2017

Transaction ID : SA11AI.4103

Amount of Each Receipt this Period

200000.00

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

204277.00

204277.00