

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

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

FOR LINE NUMBER: PAGE 7 OF 11
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CLEVELAND-CLIFFS INC. POLITICAL ACTION COMMITTEE (CliffsPAC)

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

A. Cebula, Robert, C, ,

Mailing Address 200 Public Square

City
Cleveland

State
OH

Zip Code
44114

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cleveland-Cliffs Inc.

Occupation (for Individual)
VP, Corp Controller & CAO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2019

Transaction ID : SA11AI.22083

Amount of Each Receipt this Period

100.00

☐ Memo Item

Per Month

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

B. Fedor, Terry, G, ,

Mailing Address 200 Public Square
Suite 3300

City
Cleveland

State
OH

Zip Code
44114

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cleveland-Cliffs Inc.

Occupation (for Individual)
Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2019

Transaction ID : SA11AI.22088

Amount of Each Receipt this Period

200.00

☐ Memo Item

Per Month

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

C. Goncalves, Celsco, , ,

Mailing Address 200 Public Square

City
Cleveland

State
OH

Zip Code
44114

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cleveland-Cliffs Inc.

Occupation (for Individual)
Assistant Treasurer

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
 04 / 30 / 2019

Transaction ID : SA11AI.22091

Amount of Each Receipt this Period

60.00

☐ Memo Item

Per Month

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

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

360.00