

# **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 10

(check only one)

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

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NAME OF COMMITTEE (In Full)

**CSL EMPLOYEES POLITICAL ACTION COMMITTEE**

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

**A. Etchberger, Karen, , ,**

Mailing Address 4908 Bennington Drive

City  
Schnenksville

State  
PA

Zip Code  
19473

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CSL Behring

Occupation (for Individual)

Executive VP, Business Services

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  
03 / 31 / 2019

Transaction ID : SA11AI.11428

Amount of Each Receipt this Period

100.00

☐ Memo Item

Semi-Monthly Payroll Deductions of \$50.00

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

**B. Jackman, Dennis, , ,**

Mailing Address 402 Berkley Road  
Apt E

City  
Haverford

State  
PA

Zip Code  
19401

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CSL Behring

Occupation (for Individual)

Senior VP, Public Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2019

Transaction ID : SA11AI.11452

Amount of Each Receipt this Period

200.00

☐ Memo Item

Semi-Monthly Payroll Deductions of \$100.00

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

**C. Lojewski, Robert, , ,**

Mailing Address 3438 Mill Road

City  
Collegeville

State  
PA

Zip Code  
19426

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CSL Behring

Occupation (for Individual)

Vice President, Healthcare Systems

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  
03 / 31 / 2019

Transaction ID : SA11AI.11464

Amount of Each Receipt this Period

100.00

☐ Memo Item

Semi-Monthly Payroll Deductions of \$50.00

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

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

400.00