

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

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

FOR LINE NUMBER: PAGE 80 OF 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

CenturyLink Inc. Employees Political Action Committee

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

A. Ellis, Joan, M, ,

Mailing Address 923 W Linden Cir

City
Mansfield

State
OH

Zip Code
44906-3003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EQ Management Company

Occupation (for Individual)
LEAD SALES ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2019

Transaction ID : 201911191215-464

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Ellis, Joan, M, ,

Mailing Address 923 W Linden Cir

City
Mansfield

State
OH

Zip Code
44906-3003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EQ Management Company

Occupation (for Individual)
LEAD SALES ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 22 / 2019

Transaction ID : 20191122956-464

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

c. Ellmaker, Keith, D, , SR

Mailing Address 10121 Evergreen Way

City
Everett

State
WA

Zip Code
98204-3885

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Qwest Corporation

Occupation (for Individual)
SR MGR OPERATIONS SERVICE MAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2019

Transaction ID : 201911191215-1571

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

30.00

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