

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

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

FOR LINE NUMBER: PAGE 9 OF 35

(check only one)

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

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NAME OF COMMITTEE (In Full)

Fraternity &amp; Sorority Political Action Committee

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

A. Davis, Walt, , ,

Mailing Address 143 E Citation Lane

City  
TempeState  
AZZip Code  
85284FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 05 / 2019

Transaction ID : SA11AI.29348

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

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

B. DeKieffer, Kitty, , Ms.,

Mailing Address 3002 Melissa Lane

City  
BoulderState  
COZip Code  
80301FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Gamma Phi Beta FoundationOccupation (for Individual)  
Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2019

Transaction ID : SA11AI.29263

Amount of Each Receipt this Period

100.00

☐ Memo Item  
Contribution

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

C. Dill, Andrea, , ,

Mailing Address PO Box 12316

City  
AspenState  
COZip Code  
81612FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Alpha Omicron PiOccupation (for Individual)  
Foundation Board Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 25 / 2019

Transaction ID : SA11AI.29257

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

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

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

600.00