

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

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

FOR LINE NUMBER: PAGE 82 OF 98

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

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

A. **McDaniel, Patrick, J, Mr.,**

Mailing Address 2401 West Big Beaver Road Suite 40

City
TroyState
MIZip Code
48084-3327FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Hylant

Occupation (for Individual)

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2019

Transaction ID : 43770051

Amount of Each Receipt this Period

41.68

☐ Memo Item

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

B. **Monard, Robert, T, Mr.,**

Mailing Address 811 Madison Ave Fl 10

City
ToledoState
OHZip Code
43604-5626FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Hylant

Occupation (for Individual)

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2019

Transaction ID : 43770055

Amount of Each Receipt this Period

41.68

☐ Memo Item

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

C. **Norris, David, C, Mr.,**

Mailing Address 10401 N. Meridian Street Suite 200

City
IndianapolisState
INZip Code
46290-0901FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Hylant

Occupation (for Individual)

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2019

Transaction ID : 43770059

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

125.36

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