

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

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

FOR LINE NUMBER: PAGE 24 OF 78

(check only one)

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

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NAME OF COMMITTEE (In Full)

**American Institute of Certified Public Accountants Political Action Committee**

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

**A. Bauer, William, , ,**

Mailing Address 731 N BEL AIRE TER

City  
PALATINE

State  
IL

Zip Code  
60074-3840

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CliftonLarsonAllen LLP

Occupation (for Individual)  
CPA

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  
01 / 19 / 2017

**Transaction ID : 40576948**

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

**B. Bjorkman, John, , ,**

Mailing Address 601 W Riverside Ave Ste 700

City  
SPOKANE

State  
WA

Zip Code  
99201-0614

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CliftonLarsonAllen LLP

Occupation (for Individual)  
CPA

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  
01 / 18 / 2017

**Transaction ID : 40576949**

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**C. Lehman, John, , ,**

Mailing Address 301 SW Adams St Ste 1000

City  
PEORIA

State  
IL

Zip Code  
61602-1557

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CliftonLarsonAllen LLP

Occupation (for Individual)  
CPA

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  
01 / 18 / 2017

**Transaction ID : 40576950**

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

1300.00