

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

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

FOR LINE NUMBER: PAGE 36 OF 206

(check only one)

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

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NAME OF COMMITTEE (In Full)

Human Rights Campaign PAC

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

A. Chalk, Leslie, , ,

Mailing Address 537 Fallis Rd

City  
ColumbusState  
OHZip Code  
43214-3729FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Grange InsuranceOccupation (for Individual)  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 20 / 2019

Transaction ID : VVBMQPNHRN8

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Chance, Travis, , ,

Mailing Address 9120 Vista Greens Way  
Unit 203City  
Las VegasState  
NVZip Code  
89134-0560FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Brownstein Hyatt Farber SchreckOccupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

795.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 20 / 2019

Transaction ID : VVBMQPNJ090

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Chapman, Scott, , ,

Mailing Address 326 Nelson St SW  
Unit 305City  
AtlantaState  
GAZip Code  
30313-1361FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IHGOccupation (for Individual)  
Project Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

795.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 20 / 2019

Transaction ID : VVBMQPNHQW1

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

300.00

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