

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 7

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

INVESTMENT ADVISER ASSOCIATION POLITICAL ACTION COMMITTEE (IAA-PAC)

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

A. Lowe, Todd, , ,

Mailing Address 9900 Corporate Campus Drive
Suite 2100

City
Louisville

State
KY

Zip Code
40223-5010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Parthenon LLC

Occupation (for Individual)

President, Chief Compliance Officer

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
02 / 01 / 2017

Transaction ID : SA11AI.5110

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

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

B. Wimmer, Katherine, , ,

Mailing Address 155 N. Lake Avenue
Suite 440

City

Pasadena,

State

CA

Zip Code

91101-1848

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Wimmer Associates, LLC

Occupation (for Individual)

President

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
02 / 21 / 2017

Transaction ID : SA11AI.5111

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

500.00

500.00