

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 37 OF 45

☒ 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)

The Council of Insurance Agents & Brokers Political Action Committee

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

A. DuBois, Joseph, G, Mr.,

Mailing Address 1100 Superior Ave E Ste 1500

City
Cleveland

State
OH

Zip Code
44114-2544

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oswald Companies

Occupation (for Individual)
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2020

Transaction ID : 44796417

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

B. Finucan, Kelsey, , ,

Mailing Address 1100 Superior Ave E Ste 1500

City
Cleveland

State
OH

Zip Code
44114-2544

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oswald Companies

Occupation (for Individual)
Insurance Broker

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
04 / 30 / 2020

Transaction ID : 44796418

Amount of Each Receipt this Period

62.50

☐ Memo Item

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

C. Fisher, William, F, Mr.,

Mailing Address 1100 Superior Ave E Ste 1500

City
Cleveland

State
OH

Zip Code
44114-2544

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oswald Companies

Occupation (for Individual)
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2020

Transaction ID : 44796419

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

172.50