

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Congressional Black Caucus PAC**

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

**A. Pinott, Mildred, , ,**

Mailing Address 162 Mount Tom Rd

City  
PelhamState  
NYZip Code  
10803-3309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Betz-Mitchell AssociatesOccupation (for Individual)  
Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	01	2019

**Transaction ID : VNW66GS7KG6**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Pinott, Mildred, , ,**

Mailing Address 162 Mount Tom Rd

City  
PelhamState  
NYZip Code  
10803-3309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Betz-Mitchell AssociatesOccupation (for Individual)  
Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	25	2019

**Transaction ID : VNW66GSFEB9**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. Poarch Band of Creek Indians**

Mailing Address 5811 Jack Springs Rd

City  
AtmoreState  
ALZip Code  
36502-5025FEC 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 ▼

5000.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	19	2019

**Transaction ID : VNW66GRDXV9**

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

5200.00

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