

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

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

FOR LINE NUMBER: PAGE 1306 OF 2010

(check only one)

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

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NAME OF COMMITTEE (In Full)

D.R.I.V.E. - Democrat, Republican, Independent Voter Education (The PAC of the International Brotherhood of Teamsters)

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

A. MARTIN, WM, , ,

Mailing Address 53 SPIRIT RIDGE LANE

City
AFTON

State
VA

Zip Code
22920-3062

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNITED PARCEL SERVICE

Occupation (for Individual)
DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 02 / 2019

Transaction ID : 54496182

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. MOLNAR, JOSEPH, , ,

Mailing Address 2752 HILLTOP DRIVE

City
PARMA

State
OH

Zip Code
44134-5237

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TEAMSTERS LOCAL UNION 507

Occupation (for Individual)
RECORDING SECRETARY

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
10 / 02 / 2019

Transaction ID : 54496228

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. MURPHY, DANIEL, , ,

Mailing Address 8829 GORE ST

City
ARVADA

State
CO

Zip Code
80007-7312

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TEAMSTERS LOCAL UNION 455

Occupation (for Individual)
BUSINESS AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 02 / 2019

Transaction ID : 54496248

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

100.00

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