

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)

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

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NAME OF COMMITTEE (In Full)

Transamerica Corporation PAC

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

A. Onorato, Renee, , ,

Mailing Address 440 Mamaroneck Ave

City
Harrison

State
NY

Zip Code
10528-2418

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Transamerica Financial Life Insurance

Occupation (for Individual)
501812 - Director, IT Business Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

11 / 29 / 2019

Transaction ID : AB4A52EB72AC34F22837

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Smith, Shawn, , ,

Mailing Address 28556 Malabar Rd

City
Trabuco Canyon

State
CA

Zip Code
92679-1175

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Transamerica Life Insurance Company

Occupation (for Individual)
501315 - AVP Employee Benefit Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 29 / 2019

Transaction ID : AE69C36CEBB1F4959A6D

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. EIB, CALVIN, , ,

Mailing Address 100 Light St
FI B1

City
Baltimore

State
MD

Zip Code
21202-1098

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Transamerica Life Insurance Company

Occupation (for Individual)
500454 - Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

11 / 29 / 2019

Transaction ID : AEE8E3A10D1D34D11978

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

60.00