

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

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

FOR LINE NUMBER: PAGE 238 OF 296

(check only one)

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

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NAME OF COMMITTEE (In Full)

**National Association of Insurance and Financial Advisors Political Action Comm**

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

**A. Horvath, Steven, , Mr.,**

Mailing Address 24 Swanson Ln

City  
Green Brook

State  
NJ

Zip Code  
08812-2026

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Integrated Financial Concepts

Occupation (for Individual)  
Registered Investment Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 17 / 2019

**Transaction ID : 17292333**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Takao, Eric, K., Mr.,**

Mailing Address 752 Pahumele Pl

City  
Kailua

State  
HI

Zip Code  
96734-3513

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
New York Life

Occupation (for Individual)  
Agent Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 18 / 2019

**Transaction ID : 17292339**

Amount of Each Receipt this Period

600.00

☐ Memo Item

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

**C. Jones, Katherine, M., Ms.,**

Mailing Address 2165 Harbor View Dr

City  
Dunedin

State  
FL

Zip Code  
34698-2525

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
State Farm Insurance

Occupation (for Individual)  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.50

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 18 / 2019

**Transaction ID : 17292341**

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

775.00