

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)

AZOA Services Corp. Political Action Committee (Allianz of America PAC)

A. Kenny, William, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 867 S. Cambridge Avenue City Elmhurst State IL Zip Code 60126-4524 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Allianz of America Corp Occupation (for Individual) Tax Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00			Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 30 / 2020 Transaction ID : PR376246523192 Amount of Each Receipt this Period 70.00 <input type="checkbox"/> Memo Item P/R Deduction (\$35.00 Semi-Monthly)
B. Stevens, Andrew, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 412 E Windsor Ave City Alexandria State VA Zip Code 22301-1228 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Allianz Life North America Occupation (for Individual) Sr. Director, Government Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 640.00			Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 30 / 2020 Transaction ID : PR383635923192 Amount of Each Receipt this Period 160.00 <input type="checkbox"/> Memo Item P/R Deduction (\$80.00 Semi-Monthly)
C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address City State Zip Code FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Occupation (for Individual) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼			Date of Receipt M M / D D / Y Y Y Y Y Y Amount of Each Receipt this Period <input type="checkbox"/> Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			230.00
TOTAL This Period (last page this line number only)..... ▶			3145.00