

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

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

FOR LINE NUMBER: PAGE 112 OF 613

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ernst & Young Political Action Committee

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

A. Burke, Kevin, J., ,

Mailing Address 200 Clarendon Street

City
Boston

State
MA

Zip Code
02116-5099

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EY

Occupation (for Individual)
11-Partner/Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : PR1494453250529

Amount of Each Receipt this Period

750.00

☐ Memo Item

P/R Deduction (\$750.00 Bi-Weekly)

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

B. Campanile, Thomas, F., ,

Mailing Address 5 Times Square

City
New York

State
NY

Zip Code
10036-6527

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EY

Occupation (for Individual)
11-Partner/Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : PR1494453650529

Amount of Each Receipt this Period

1000.00

☐ Memo Item

P/R Deduction (\$1000.00 Bi-Weekly)

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

C. Carrigan, Kevin, T., ,

Mailing Address 155 North Wacker Drive

City
Chicago

State
IL

Zip Code
60606-1787

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EY

Occupation (for Individual)
11-Partner/Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : PR1494453950529

Amount of Each Receipt this Period

1000.00

☐ Memo Item

P/R Deduction (\$1000.00 Bi-Weekly)

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

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

2750.00