

# **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)

PAGE 17 OF 22

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

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NAME OF COMMITTEE (In Full)

**BROTHERHOOD OF RAILROAD SIGNALMEN POLITICAL ACTION COMMITTEE**

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

**A. Thacker, Kyle, , ,**

Mailing Address 416 Linden Avenue

City  
Waverly

State  
OH

Zip Code  
45690

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Norfolk Southern

Occupation (for Individual)  
Signalman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2019

**Transaction ID : SA11AI.38576**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Monthly Payroll Deduction

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

**B. Thacker, Kyle, , ,**

Mailing Address 416 Linden Avenue

City  
Waverly

State  
OH

Zip Code  
45690

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Norfolk Southern

Occupation (for Individual)  
Signalman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2019

**Transaction ID : SA11AI.38650**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Monthly Payroll Deduction

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

**C. Thacker, Kyle, , ,**

Mailing Address 416 Linden Avenue

City  
Waverly

State  
OH

Zip Code  
45690

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Norfolk Southern

Occupation (for Individual)  
Signalman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2019

**Transaction ID : SA11AI.38722**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Monthly Payroll Deduction

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

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

60.00