

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

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

FOR LINE NUMBER: PAGE 992 OF 1513

(check only one)

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

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NAME OF COMMITTEE (In Full)

INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION PAC

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

A. Conroy, Michael, D., ,

Mailing Address 704 W Oregon Ave

City
Philadelphia

State
PA

Zip Code
19148-4539

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Philadelphia Fire Dept.

Occupation (for Individual)
Fire Fighter / EMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 20 / 2019

Transaction ID : C29046272

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. Coughlin, Brian, , ,

Mailing Address 1333 Revere Rd

City
Yardley

State
PA

Zip Code
19067-4346

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Philadelphia Fire Dept.

Occupation (for Individual)
Fire Fighter / EMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 16 / 2019

Transaction ID : C29052531

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. Kane, Thomas, , ,

Mailing Address 51 Gunning Ln

City
Langhorne

State
PA

Zip Code
19047-8541

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Philadelphia Fire Dept.

Occupation (for Individual)
Fire Fighter / EMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 02 / 2019

Transaction ID : C29042826

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

1500.00