

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

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

FOR LINE NUMBER: PAGE 212 OF 424

(check only one)

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

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NAME OF COMMITTEE (In Full)

BLACK HILLS CORPORATION POLITICAL ACTION COMMITTEE

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

A. White, Kyle, , ,

Mailing Address PO Box 1400

City
Rapid City

State
SD

Zip Code
57709-1400

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Black Hills Corporation

Occupation (for Individual)
VP Regulatory Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1430.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 29 / 2019

Transaction ID : A0089EB1B171B470D975

Amount of Each Receipt this Period

65.00

☐ Memo Item

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

B. Bassell-Herman, Brooke, , ,

Mailing Address 1205 SW 37th St

City
Grimes

State
IA

Zip Code
50111-4947

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Black Hills Corporation

Occupation (for Individual)
Anly Regulatory & Finance Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 29 / 2019

Transaction ID : AE202C61FF0DF49A3AB0

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Massie, Charles, , ,

Mailing Address 921 S Burma Ave

City
Gillette

State
WY

Zip Code
82718-7724

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Black Hills Corporation

Occupation (for Individual)
Prof Safety

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 29 / 2019

Transaction ID : A550BA05BC8C449EDB20

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

85.00

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