

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

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

FOR LINE NUMBER: PAGE 15 OF 26

(check only one)

☒ 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)

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

A. Thomas, Anthony, , ,

Mailing Address 5111 Bluff Circle

City
Edina

State
MN

Zip Code
55436-2185

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allianz Life North America

Occupation (for Individual)
FMO Dist Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2019

Transaction ID : PR283081722324

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$25.00 Semi-Monthly)

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

B. Sullivan, Jeffrey, , ,

Mailing Address 4386 115th St SE

City
Delano

State
MN

Zip Code
55328-8363

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TruChoice Financial Group LLC

Occupation (for Individual)
Snr Dir FMO Dist. Business Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2019

Transaction ID : PR283105322324

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$25.00 Semi-Monthly)

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

C. McDonald, Daniel, , ,

Mailing Address 6779 Brendan Court

City
Edina

State
MN

Zip Code
55439-1070

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allianz Life North America

Occupation (for Individual)
ASST. VP OF SALES AND DISTRIBUTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2019

Transaction ID : PR283111922324

Amount of Each Receipt this Period

40.00

☐ Memo Item

P/R Deduction (\$20.00 Semi-Monthly)

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

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

140.00