

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

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

FOR LINE NUMBER: PAGE 176 OF 286

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

FirstEnergy Corp. Political Action Committee

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

A. Bahil, Justin M, , ,

Mailing Address 265 Lawn Dr

City
Akron

State
OH

Zip Code
44312-1218

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

FirstEnergy

Occupation (for Individual)

Mgr, Utilities Sourcing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 30 2020

Transaction ID : PR1650669870496

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

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

B. Shuttleworth, Edward L, , ,

Mailing Address 4565 Bridle Trl

City
Akron

State
OH

Zip Code
44333-4736

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

FirstEnergy

Occupation (for Individual)

Reg Pres, Ohio Edison

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 30 2020

Transaction ID : PR1652987670496

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$150.00 Bi-Weekly)

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

C. Rouse, Lisa M, , ,

Mailing Address 2593 Highgate Cir Nw

City
North Canton

State
OH

Zip Code
44720-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

FirstEnergy

Occupation (for Individual)

Dir, Outage Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 30 2020

Transaction ID : PR1667397370496

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

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

300.00