

# **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)

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

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NAME OF COMMITTEE (In Full)

**The Council of Insurance Agents & Brokers Political Action Committee**

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

**A. Briggs, Jon, , Mr.,**

Mailing Address 6200 Lyndon B Johnson Fwy Ste 200

City  
Dallas

State  
TX

Zip Code  
75240-6359

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IMA Financial Group

Occupation (for Individual)  
Insurance Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
09 / 20 / 2019

Transaction ID : 44066059

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

**B. Colagrossi, Louis, A, Mr.,**

Mailing Address 3900 Kinross Lakes Pkwy Ste 300

City  
Richfield

State  
OH

Zip Code  
44286-9381

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AssuredPartners Of Ohio, LLC

Occupation (for Individual)  
Insurance Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

MM / DD / YYYY  
09 / 20 / 2019

Transaction ID : 44066060

Amount of Each Receipt this Period

610.00

☐ Memo Item

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

**C. Palmer, William, J, Mr.,**

Mailing Address 850 Concourse Parkway South Suite

City  
Maitland

State  
FL

Zip Code  
32751-6141

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BB&T Insurance

Occupation (for Individual)  
Insurance Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
09 / 20 / 2019

Transaction ID : 44066061

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

1160.00