

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

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

FOR LINE NUMBER: PAGE 74 OF 115

(check only one)

☒ 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. Carroll, Robert, W, Mr., Jr.

Mailing Address 2401 West Big Beaver Road Suite 40

City
TroyState
MIZip Code
48084-3327FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Hylant

Occupation (for Individual)

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2019

Transaction ID : 44270315

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Curtis, Joe, , Mr.,

Mailing Address 2401 West Big Beaver Road Suite 40

City
TroyState
MIZip Code
48084-3327FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Hylant

Occupation (for Individual)

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2019

Transaction ID : 44270319

Amount of Each Receipt this Period

22.92

☐ Memo Item

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

C. Denman, Chris, B, Mr.,

Mailing Address 811 Madison Ave Fl 11

City
ToledoState
OHZip Code
43604-5626FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Hylant

Occupation (for Individual)

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2019

Transaction ID : 44270320

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

67.92