

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

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

FOR LINE NUMBER: PAGE 88 OF 157

(check only one)

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

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NAME OF COMMITTEE (In Full)

Ernst & Young Political Action Committee

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

A. Fashinpaur, Melissa, Apple, ,

Mailing Address 50 South Main Street

City
AkronState
OHZip Code
44308-1828FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EYOccupation (for Individual)
Partner/Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : PR2239162748808

Amount of Each Receipt this Period

250.00

☐ Memo Item

P/R Deduction (\$250.00 Monthly)

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

B. Gerald, Victor, T., ,

Mailing Address 300 First Stamford Place

City

Stamford

State

CT

Zip Code

06902-6765

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EYOccupation (for Individual)
Partner/Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : PR2239164648808

Amount of Each Receipt this Period

500.00

☐ Memo Item

P/R Deduction (\$500.00 Monthly)

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

C. Gilroy, Julie, Ann, ,

Mailing Address 155 North Wacker Drive

City

Chicago

State

IL

Zip Code

60606-1787

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EYOccupation (for Individual)
Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : PR2239164948808

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$300.00 Weekly)

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

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

1050.00