

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

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

FOR LINE NUMBER: PAGE 472 OF 972

(check only one)

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

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NAME OF COMMITTEE (In Full)

United Steelworkers Political Action Fund

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

A. Evener, William, Jack, ,

Mailing Address 224 Michigan St

City
Porter

State
IN

Zip Code
46304-1734

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United States Steel Corporation

Occupation (for Individual)
Common - Production & Maintenance V

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

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

Transaction ID : AC2BC5D4A41444C569EA

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Laffoon, Nicholas, L, ,

Mailing Address 7116 134th Ave W

City

Taylor Ridge

State

IL

Zip Code

61284-9621

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Arconic-Davenport

Occupation (for Individual)
Laborer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

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

Transaction ID : A12DFF3F3918C46209E5

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. Collins, Deidria, L, ,

Mailing Address 224 N Sugar St

City

Chillicothe

State

OH

Zip Code

45601-2648

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pixelle Spec Sol (frmly Glatfelter Pri

Occupation (for Individual)
Laborer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

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

Transaction ID : A314A06B6E9DA4E35ADC

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

35.00