

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

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

FOR LINE NUMBER: PAGE 219 OF 609

(check only one)

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

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NAME OF COMMITTEE (In Full)

Koch Industries, Inc. Political Action Committee (KOCHPAC)

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

A. Graves, Kelly, D, ,

Mailing Address 4111 E 37th St N

City
WichitaState
KSZip Code
67220-3203FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Koch Supply & Trading Lp

Occupation (for Individual)

Commercial Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2019

Transaction ID : 2019081218215-696

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Graves, Kelly, D, ,

Mailing Address 4111 E 37th St N

City
WichitaState
KSZip Code
67220-3203FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Koch Supply & Trading Lp

Occupation (for Individual)

Commercial Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2019

Transaction ID : 2019082719175-692

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. Graves, Kerry, D, ,

Mailing Address 1725 Cooper Creek Rd

City
DentonState
TXZip Code
76208-1001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Gp Corrugated Llc

Occupation (for Individual)

Area General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2019

Transaction ID : 2019081218215-330

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

75.00

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