

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

National Federation of Independent Business Federal Political Action Committee

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

A. Seidl, Chris, , ,

Mailing Address 125 School Creek Trl

City
LuxemburgState
WIZip Code
54217-1095FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Luxemburg PharmacyOccupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M	D D	Y Y Y Y
01	27	2020

Transaction ID : 2020012712455-57

Amount of Each Receipt this Period

350.00

☐ Memo Item

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

B. Shoemaker, Scott, E, ,

Mailing Address 3024 County Road 25

City
CardingtonState
OHZip Code
43315-9395FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Scotland FarmsOccupation (for Individual)
Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
01	17	2020

Transaction ID : 2020011716256-116

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Smiles Ahead Family Dentistry

Mailing Address 2456 Home Acre Dr

City
ColumbusState
OHZip Code
43231-1647FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
01	23	2020

Transaction ID : D3C5FDD1247FF5394D2

Amount of Each Receipt this Period

250.00

☐ Memo Item

See Attribution Below

SUBTOTAL of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

850.00