

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

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

FOR LINE NUMBER: PAGE 33 OF 52

(check only one)

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

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NAME OF COMMITTEE (In Full)

STERIS CORPORATION GOOD GOVERNMENT FUND

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

A. Nejman, Joseph, , ,

Mailing Address 13615 Laurel Ln

City
Valley View

State
OH

Zip Code
44125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STERIS Corporation

Occupation (for Individual)
Senior Director, Internal Audit & Comp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2019

Transaction ID : SA11AI.40342

Amount of Each Receipt this Period

15.00

☐ Memo Item
15.00/pay period

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

B. Niewolak, Rosemary, , ,

Mailing Address 989 Ashbrooke Way

City
Hudson

State
OH

Zip Code
44236

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STERIS Corporation

Occupation (for Individual)
Vice President & General Manager - IP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 12 / 2019

Transaction ID : SA11AI.40467

Amount of Each Receipt this Period

23.00

☐ Memo Item
23.00/pay period

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

C. Niewolak, Rosemary, , ,

Mailing Address 989 Ashbrooke Way

City
Hudson

State
OH

Zip Code
44236

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STERIS Corporation

Occupation (for Individual)
Vice President & General Manager - IPT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2019

Transaction ID : SA11AI.40468

Amount of Each Receipt this Period

23.00

☐ Memo Item
23.00/pay period

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

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

61.00