

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

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

FOR LINE NUMBER: PAGE 19 OF 290

(check only one)

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

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NAME OF COMMITTEE (In Full)

Deloitte Political Action Committee

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

A. Beckey, Pamela, C, ,

Mailing Address 200 Berkeley St  
13Th Fl.

City  
Boston

State  
MA

Zip Code  
02116-5022

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Deloitte Tax LLP

Occupation (for Individual)  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
01 / 18 / 2017

Transaction ID : 952571EB-7305-4DC8-

Amount of Each Receipt this Period

3000.00

☐ Memo Item

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

B. Belson, Gerald, M, ,

Mailing Address 7900 Tysons One Pl  
Ste 800

City  
McLean

State  
VA

Zip Code  
22102-5974

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Deloitte Consulting LLP

Occupation (for Individual)  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
01 / 17 / 2017

Transaction ID : 20170120164636-1526

Amount of Each Receipt this Period

625.00

☐ Memo Item

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

C. Benassi, Rita, R, ,

Mailing Address 201 N Franklin St  
Ste 3600

City  
Tampa

State  
FL

Zip Code  
33602-5818

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Deloitte Tax LLP

Occupation (for Individual)  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
01 / 12 / 2017

Transaction ID : CAEED92A-5D39-4025-

Amount of Each Receipt this Period

1500.00

☐ Memo Item

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

5125.00

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