

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**NiSource Inc. PAC**

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

**A. Malone, John, W, ,**

Mailing Address 1816 Forest Lane

City

Crown Point

State

IN

Zip Code

46307

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Northern IN Public Serv Co LLC

Occupation (for Individual)

Dir Major Accounts Trans

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 31 / 2020

**Transaction ID : PR263252532655**

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

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

**B. Geesey, Ray, M, ,**

Mailing Address 10 Cherry Lane

City

Abbottstown

State

PA

Zip Code

17301-9736

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Columbia Gas of Pennsylvania

Occupation (for Individual)

Ldr Field Damage Prevention

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.10

Date of Receipt

05 / 31 / 2020

**Transaction ID : PR263253232655**

Amount of Each Receipt this Period

94.02

☐ Memo Item

P/R Deduction (\$94.02 Monthly)

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

**C. Bradley, Darnita, M, ,**

Mailing Address 1465 Sedgefield Drive

City

New Albany

State

OH

Zip Code

43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Columbia Gas of Ohio Inc

Occupation (for Individual)

Mgr Local Govt Policy

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

500.55

Date of Receipt

05 / 31 / 2020

**Transaction ID : PR263253932655**

Amount of Each Receipt this Period

100.11

☐ Memo Item

P/R Deduction (\$100.11 Monthly)

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

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

244.13