

# **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)

PAGE 17 OF 33

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

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

**A. Joshi, Gopi, , ,**

Mailing Address 2000 Purchase Street

City  
Purchase

State  
NY

Zip Code  
10577

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

MasterCard

Occupation (for Individual)

Business Leader, Software Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

03 / 19 / 2020

**Transaction ID : 4306B588D7436C5EB75A**

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

**B. Kesselring, Teresa, , ,**

Mailing Address 2000 Purchase Street

City  
Purchase

State  
NY

Zip Code  
10577

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

MasterCard

Occupation (for Individual)

Senior Vice President, Service Deliver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 15 / 2020

**Transaction ID : 2020031218535-115**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. Khanna, Joe, , ,**

Mailing Address 2000 Purchase Street

City  
Purchase

State  
NY

Zip Code  
10577

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

MasterCard

Occupation (for Individual)

Business Leader, Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 15 / 2020

**Transaction ID : 2020031218535-64**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

400.00