

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

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

FOR LINE NUMBER: PAGE 121 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

Corning Incorporated Employees Political Action Committee (COREPAC)

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

A. Nelson, Avery, H, , III

Mailing Address 38 Barrington Rd

City
Horseheads

State
NY

Zip Code
14845-2278

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corning Incorporated

Occupation (for Individual)

SVP & GM, CET

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 16 / 2019

Transaction ID : 2019051710134-126

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

B. Nelson, Avery, H, , III

Mailing Address 38 Barrington Rd

City
Horseheads

State
NY

Zip Code
14845-2278

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corning Incorporated

Occupation (for Individual)

SVP & GM, CET

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 31 / 2019

Transaction ID : 2019053110414-126

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. Nevins, Richard, C, ,

Mailing Address 10502 South Rd

City
Corning

State
NY

Zip Code
14830-3200

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corning Incorporated

Occupation (for Individual)

DVP Optical Fiber WW Comm Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 31 / 2019

Transaction ID : 2019053110414-127

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

100.00

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