

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

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

FOR LINE NUMBER: PAGE 59 OF 100

(check only one)

☒ 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. Hooper, Michael, , ,**

Mailing Address 780 W 200 N

City  
Valparaiso

State  
IN

Zip Code  
46385

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Northern IN Public Serv Co LLC

Occupation (for Individual)  
SVP Reg/Legis Aff & Strategy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2020

**Transaction ID : PR316438232406**

Amount of Each Receipt this Period

240.62

☐ Memo Item

P/R Deduction (\$120.31 Bi-Weekly)

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

**B. Enright, Dennis, James, ,**

Mailing Address 106 Michigan Ave

City  
Valparaiso

State  
IN

Zip Code  
46383

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Northern IN Public Serv Co LLC

Occupation (for Individual)  
Dir Safety Cmplnce&Risk Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2020

**Transaction ID : PR326046132406**

Amount of Each Receipt this Period

106.72

☐ Memo Item

P/R Deduction (\$53.36 Bi-Weekly)

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

**C. Melby, Megan, Lea, ,**

Mailing Address 3588 Reed Rd

City  
Upper Arlington

State  
OH

Zip Code  
43221

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NiSource Corporate Services Co

Occupation (for Individual)  
Change Management Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

345.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2020

**Transaction ID : PR326049332406**

Amount of Each Receipt this Period

86.28

☐ Memo Item

P/R Deduction (\$86.28 Monthly)

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

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

433.62