

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

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

FOR LINE NUMBER: PAGE 10 OF 16

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Consumer Bankers Association Political Action Committee

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

A. Snyder, Erin, , ,

Mailing Address 3318 Sherman Ave, NW # 107

City
Washington

State
DC

Zip Code
20010-1549

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Consumer Bankers Association

Occupation (for Individual)
AVP, Exhibits & Sponsorships

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 30 / 2019

Transaction ID : 13335639

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Pommerehn, David, , ,

Mailing Address 10 Carvel Road

City
Annapolis

State
MD

Zip Code
21409-6217

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Consumer Bankers Association

Occupation (for Individual)
AVP, Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 30 / 2019

Transaction ID : 13335641

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. O'Connor, Kevin, , ,

Mailing Address 1301 M. St NW Apt 114

City
Washington

State
DC

Zip Code
20005-4205

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Consumer Bankers Association

Occupation (for Individual)
AVP, Membership

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 30 / 2019

Transaction ID : 13335642

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

390.00

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