

**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 134 OF 213
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
International Brotherhood of Electrical Workers Political Action Committee

A. Ann Miller
Full Name (Last, First, Middle Initial)

Mailing Address 47421 River Crest Street

City Potomac Falls State VA Zip Code 20165-3112

FEC ID number of contributing federal political committee. **C**

Name of Employer IBEW Occupation International Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2015

Transaction ID : PR2261567243529

Amount of Each Receipt this Period
 150.00

P/R Deduction (\$150.00 Monthly)

B. Anna D. Jerry
Full Name (Last, First, Middle Initial)

Mailing Address 825 Co Rd 30

City Columbia State AL Zip Code 36319-5553

FEC ID number of contributing federal political committee. **C**

Name of Employer IBEW Occupation International Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2015

Transaction ID : PR2263227043529

Amount of Each Receipt this Period
 25.00

P/R Deduction (\$25.00 Monthly)

C. Robert J. Prunn
Full Name (Last, First, Middle Initial)

Mailing Address 1737 Wakefield Drive

City Brandon State FL Zip Code 33511-2313

FEC ID number of contributing federal political committee. **C**

Name of Employer IBEW Occupation International Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2015

Transaction ID : PR2263227143529

Amount of Each Receipt this Period
 25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	