

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

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

FOR LINE NUMBER: PAGE 6 OF 15

(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. Roberts, Christine, , ,

Mailing Address 163 W. Plain St.

City
WaylandState
MAZip Code
01778-4318FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Citizens BankOccupation (for Individual)
Head of Student Lending

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
02 / 05 / 2020

Transaction ID : 14020528

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
AnnapolisState
MDZip Code
21409-6217FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Consumer Bankers AssociationOccupation (for Individual)
AVP, Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2020

Transaction ID : 14020531

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Bartlett, David, , ,

Mailing Address 6541 Bay Tree Ct.

City
Falls ChurchState
VAZip Code
22041-1001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Consumer Bankers AssociationOccupation (for Individual)
Vice President, Congressional Relation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2020

Transaction ID : 14020532

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

450.00

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