

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

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

FOR LINE NUMBER: PAGE 25 OF 32

(check only one)

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

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

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

A. Schuler, Joe, , ,

Mailing Address 2200 Mastercard Blvd

City
O Fallon

State
MO

Zip Code
63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MasterCard

Occupation (for Individual)
Leader, Systems Programming

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : 2019031411494-153

Amount of Each Receipt this Period

115.00

☐ Memo Item

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

B. Sharp, David, , ,

Mailing Address 2200 Mastercard Blvd

City
O Fallon

State
MO

Zip Code
63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MasterCard

Occupation (for Individual)
Consultant, Project Mgmt

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
03 / 15 / 2019

Transaction ID : 2019031411494-128

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Simon, Eileen, , ,

Mailing Address 2000 Purchase St

City
Purchase

State
NY

Zip Code
10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MasterCard

Occupation (for Individual)
Associate General 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
03 / 15 / 2019

Transaction ID : 2019031411494-27

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

315.00