

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)

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

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NAME OF COMMITTEE (In Full)

Self-Insurance Institute of America, Inc. PAC (Self-Insurance PAC)

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

A. Mueller, Julie, , ,

Mailing Address 5589 Chevoit Rd.

City
Cincinnati

State
OH

Zip Code
45247

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Custom Design Benefits, Inc.

Occupation (for Individual)
President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 06 / 2019

Transaction ID : SA11AI.7020

Amount of Each Receipt this Period

2000.00

☐ Memo Item
PAC Contribution

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

B. O'Leary, Katie, , ,

Mailing Address 1550 Liberty Ridge Dr.
Suite 330

City
Wayne

State
PA

Zip Code
19087

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ELAP Services

Occupation (for Individual)
SVP, Innovation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 04 / 2019

Transaction ID : SA11AI.7092

Amount of Each Receipt this Period

500.00

☐ Memo Item
PAC Contribution

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

C. Peck, Ron, Evan, ,

Mailing Address 163 Bay State Dr.

City
Braintree

State
MA

Zip Code
02184

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Phia Group

Occupation (for Individual)
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 29 / 2019

Transaction ID : SA11AI.7090

Amount of Each Receipt this Period

500.00

☐ Memo Item
PAC Contribution

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

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

3000.00