

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

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

FOR LINE NUMBER: PAGE 39 OF 123

(check only one)

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

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NAME OF COMMITTEE (In Full)

SEAL PAC SUPPORTING ELECTING AMERICAN LEADERS PAC

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

A. GILLEN, PATRICK, B, MR., USAF

Mailing Address 4921 HONEYWOOD CT

City  
DAYTON

State  
OH

Zip Code  
45424

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 11 / 2019

Transaction ID : A1A663CFD4B594913BEC

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. GILLOGLY, BRONSON, R, MR.,

Mailing Address 1258 GREENWOOD AVE APT 16

City  
ZANESVILLE

State  
OH

Zip Code  
43701

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 26 / 2019

Transaction ID : AFAEF601334F24CCB9C1

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

C. GLEASON, JOSEPH, E, MR.,

Mailing Address 8340 GREENRIDGE RD

City  
NORTH CHARLESTON

State  
SC

Zip Code  
29406-9740

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2019

Transaction ID : A59166B62F8B64C3980D

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

425.00

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