

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)

The Council of Insurance Agents & Brokers Political Action Committee

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

A. Rice, Grantland, , Mr., IV

Mailing Address 24 Spring St

City
Mountain Brk

State
AL

Zip Code
35213-3020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cobbs, Allen & Hall, Inc.

Occupation (for Individual)
Insurance Broker

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
02 / 01 / 2017

Transaction ID : 40546434

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. Hughes, Julie, , Ms.,

Mailing Address 189 E Lake Shore Dr Ste 7e
#7E

City
Chicago

State
IL

Zip Code
60611-6313

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Hub International Limited (HQ)

Occupation (for Individual)
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2017

Transaction ID : 40546435

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

C. Hobbs, David, W, Mr.,

Mailing Address 8720 Stony Point Parkway

City
Richmond

State
VA

Zip Code
23235

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Hilb Group, The

Occupation (for Individual)
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2017

Transaction ID : 40546436

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

8000.00