

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)

Grange Insurance Federal PAC

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

A. Ammendola, John, , ,

Mailing Address 1385 Fountaine Drive

City
Columbus

State
OH

Zip Code
43221

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Grange Insurance

Occupation (for Individual)
Associate

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
10 / 02 / 2019

Transaction ID : SA11AI.33121

Amount of Each Receipt this Period

25.00

☐ Memo Item
bi-weekly payroll deduction

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

B. Ammendola, John, , ,

Mailing Address 1385 Fountaine Drive

City
Columbus

State
OH

Zip Code
43221

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Grange Insurance

Occupation (for Individual)
Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 02 / 2019

Transaction ID : SA11AI.33122

Amount of Each Receipt this Period

25.00

☐ Memo Item
bi-weekly payroll deduction

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

C. Ammendola, John, , ,

Mailing Address 1385 Fountaine Drive

City
Columbus

State
OH

Zip Code
43221

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Grange Insurance

Occupation (for Individual)
Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 06 / 2019

Transaction ID : SA11AI.33392

Amount of Each Receipt this Period

25.00

☐ Memo Item
bi-weekly payroll deduction

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

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

75.00