SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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(check only one)								
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13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name DeBay, Gabriel, Orian, Date of Receipt Mailing Address 1124 NE Lilac St Apt 302 2018 01 City Zip Code State C27129247 WA 980297875 Issaquah Amount of Each Receipt this Period FEC ID number of contributing C 16.67 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Fire Fighter / EMS Shoreline Fire Dept. Receipt For: Aggregate Year-to-Date ▼ Primary General 0.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Jones, Ryan, C.,, Date of Receipt Mailing Address 2150 Katy Dr 01 2018 City State Zip Code C27129192 TX **Beaumont** 777074607 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Beaumont Fire Dept. Fire Fighter / EMS Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 0.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Woolf, Scott,,, Date of Receipt Mailing Address 2237 Ballentine Pike 01 2018 City State Zip Code C27129120 OH Springfield 455028627 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Springfield Fire Dept. Fire Fighter / EMS Receipt For: Aggregate Year-to-Date ▼ Primary General 0.00 Other (specify) 1016.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

7