

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 85 OF 104

(check only one)

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

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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

A. Quirk,John,F.,,

Mailing Address 2028 Edmondson Ave

City  
Baltimore

State  
MD

Zip Code  
212284235

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Baltimore County Fire Dept.

Occupation (for Individual)  
Fire Fighter / EMS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

MM / DD / YYYY  
01 / 11 / 2018

C27116699

Amount of Each Receipt this Period

750.00

☐ Memo Item

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

B. Keenan,Matthew,,,

Mailing Address 190 Colonial Dr

City  
Hanover

State  
MA

Zip Code  
023392103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Quincy Fire Dept.

Occupation (for Individual)  
Fire Fighter / EMS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

MM / DD / YYYY  
01 / 15 / 2018

C27116691

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. Quirk,John,F.,,

Mailing Address 2028 Edmondson Ave

City  
Baltimore

State  
MD

Zip Code  
212284235

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Baltimore County Fire Dept.

Occupation (for Individual)  
Fire Fighter / EMS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

0.00

Date of Receipt

MM / DD / YYYY  
01 / 11 / 2018

C27116529

Amount of Each Receipt this Period

750.00

☐ Memo Item

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

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

2000.00