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

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

FOF	FOR LINE NUMBER:					: 8	31	OF		104
(check only one)										
X	11a		11b		11c		12			
	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 Galvin, William, J.,, III Date of Receipt Mailing Address 13450 Murkins Rd 2018 01 City State Zip Code C27117221 MO Kansas City 641337005 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) Kansas City Fire Dept. Fire Fighter / EMS 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. Nelson, Dennis,,, Date of Receipt Mailing Address 3664 Swan Ct 01 2018 City State Zip Code C27117143 CA Merced 953408477 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) Cal Fire Local 2881 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. Simpson, Scott, M., Date of Receipt Mailing Address 271 West Dr 01 2018 City State Zip Code C27117091 CO Golden 804037784 Amount of Each Receipt this Period FEC ID number of contributing C 750.00 federal political committee. Memo Item Occupation (for Individual) Name of Employer (for Individual) Denver Fire Dept. Fire Fighter / EMS Receipt For: Aggregate Year-to-Date ▼ Primary General 0.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....