SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:						PAGE	_ ′	19	OF		104	
(c	(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 Gerdis,Paul,,, Date of Receipt Mailing Address 146 Springwater Trce 2018 01 City State Zip Code C27133716 GA 301886000 Woodstock Amount of Each Receipt this Period FEC ID number of contributing C 750.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Fire Fighter / EMS Atlanta 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. Perry, Eric,,, Date of Receipt Mailing Address 424 17th St Apt D10 01 2018 City State Zip Code C27133715 NJ 070874393 Union City 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) North Hudson 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.** Pesature, William, ... Date of Receipt Mailing Address 2259 Sandy Point Ln 01 2018 City State Zip Code C27133657 SC Mount Pleasant 294669203 Amount of Each Receipt this Period FEC ID number of contributing C 750.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) South Carolina Professional Fire Fight Fire Fighter / EMS Receipt For: Aggregate Year-to-Date ▼ Primary General 0.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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