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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:						PAGE	. (	60	OF		104
(check only one)											
	X	11a		11b		11c		12			
		13		14		15		16	;		17

Detailed Summary Page 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 McKay, Scott,,, Date of Receipt Mailing Address 5 Normandy Dr 2018 01 City Zip Code State C27122449 MO Lake Saint Louis 633671614 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) Professional Fire Fighters of Eastern 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. Perez, Andre, ... Date of Receipt Mailing Address 5126 Monet Ave 01 2018 City State Zip Code C27122273 FL Belle Isle 328121049 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) Orange County Fire Fighters Associatio 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.** Nye, Montgomery, ... Date of Receipt Mailing Address 13762 Lawson Rd 01 2018 City State Zip Code C27122221 MI Grand Ledge 488379756 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) Grand Ledge 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).....

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