

**SCHEDULE L-A (FEC Form 3X)**  
**ITEMIZED RECEIPTS OF LEVIN FUNDS**

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

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FOR LINE NUMBER: ☒ 1a ☐ 2  
(check only one)

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

<b>A.</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <input type="checkbox"/> Memo Item  Mailing Address  City State Zip Code  Name of Employer (for Individual)  Occupation (for Individual)			Date of Receipt MM / DD / YYYY 11 / 07 / 2019 SA20191107000000521 Amount of Each Receipt this Period 100.00 Aggregate Year-to-Date 0.00
<b>B.</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <input type="checkbox"/> Memo Item ,,,,, Mailing Address  City State Zip Code  Name of Employer (for Individual)  Occupation (for Individual)			Date of Receipt MM / DD / YYYY 11 / 07 / 2019 SA20191107000000519 Amount of Each Receipt this Period 100.00 Aggregate Year-to-Date 0.00
<b>C.</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <input type="checkbox"/> Memo Item  Mailing Address  City State Zip Code  Name of Employer (for Individual)  Occupation (for Individual)			Date of Receipt MM / DD / YYYY 11 / 07 / 2019 SA20191107000000520 Amount of Each Receipt this Period 100.00 Aggregate Year-to-Date
<b>D.</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <input type="checkbox"/> Memo Item  Mailing Address  City State Zip Code  Name of Employer (for Individual)  Occupation (for Individual)			Date of Receipt MM / DD / YYYY   Amount of Each Receipt this Period  Aggregate Year-to-Date
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			300.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			300.00

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<b>A.</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <input type="checkbox"/> Memo Item Mailing Address City State Zip Code Name of Employer (for Individual) Occupation (for Individual)	Date of Receipt 11 / 07 / 2019 SA20191107000000526 Amount of Each Receipt this Period 100.00 Aggregate Year-to-Date 0.00
<b>B.</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <input type="checkbox"/> Memo Item Mailing Address City State Zip Code Name of Employer (for Individual) Occupation (for Individual)	Date of Receipt 11 / 07 / 2019 SA20191107000000525 Amount of Each Receipt this Period 100.00 Aggregate Year-to-Date 0.00
<b>C.</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <input type="checkbox"/> Memo Item Mailing Address City State Zip Code Name of Employer (for Individual) Occupation (for Individual)	Date of Receipt 11 / 07 / 2019 SA20191107000000524 Amount of Each Receipt this Period 100.00 Aggregate Year-to-Date
<b>D.</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <input type="checkbox"/> Memo Item Mailing Address City State Zip Code Name of Employer (for Individual) Occupation (for Individual)	Date of Receipt 11 / 07 / 2019 SA20191107000000522 Amount of Each Receipt this Period 100.00 Aggregate Year-to-Date
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶ 400.00	
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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<p><b>A.</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <input type="checkbox"/> Memo Item</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Name of Employer (for Individual)</p> <p>Occupation (for Individual)</p>	<p>Date of Receipt</p> <p>11 / 07 / 2019</p> <p>SA2019110700000523</p> <p>Amount of Each Receipt this Period</p> <p>100.00</p> <p>Aggregate Year-to-Date</p> <p>0.00</p>
<p><b>B.</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <input type="checkbox"/> Memo Item</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Name of Employer (for Individual)</p> <p>Occupation (for Individual)</p>	<p>Date of Receipt</p> <p>11 / 07 / 2019</p> <p>SA2019110700000522</p> <p>Amount of Each Receipt this Period</p> <p>100.00</p> <p>Aggregate Year-to-Date</p> <p>0.00</p>
<p><b>C.</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <input type="checkbox"/> Memo Item</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Name of Employer (for Individual)</p> <p>Occupation (for Individual)</p>	<p>Date of Receipt</p> <p>  /  /  </p> <p>Amount of Each Receipt this Period</p> <p>  </p> <p>Aggregate Year-to-Date</p> <p>  </p>
<p><b>D.</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <input type="checkbox"/> Memo Item</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Name of Employer (for Individual)</p> <p>Occupation (for Individual)</p>	<p>Date of Receipt</p> <p>  /  /  </p> <p>Amount of Each Receipt this Period</p> <p>  </p> <p>Aggregate Year-to-Date</p> <p>  </p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p> <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>	<p>200.00</p> <p>600.00</p>