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

Use separate schedule(s) for each category of the

F	FOR LINE NUMBER:						: 8	34	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 Wright,Louie,A.,, Date of Receipt Mailing Address 2304 NE 35th Ct 2018 01 City State Zip Code C27116885 MO Kansas City 641162878 Amount of Each Receipt this Period FEC ID number of contributing C 750.00 federal political committee. Name of Employer (for Individual) Memo Item 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. Wilding, Steve,,, Date of Receipt Mailing Address 10430 S Justin Dr 01 2018 City State Zip Code C27116849 Oak Creek WI 531546534 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) Oak Creek 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. Sweeney, Laurita, L., Date of Receipt Mailing Address 1100 Kasper Dr 01 2018 City State Zip Code C27116838 FL Orlando 328061849 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 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 0.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional).....

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

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