

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 OF 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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

A. Stuhlman,Jen,M.,,

Mailing Address 817 Harmony View Dr

City
Cottleville

State
MO

Zip Code
633762584

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Professional Fire Fighters of Eastern

Occupation (for Individual)
Fire Fighter / EMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 04 / 2018

C27125363

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Robinson,Scott,,,

Mailing Address 930 Smithfield Ave Apt 913

City
Providence

State
RI

Zip Code
02904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cranston Fire Dept.

Occupation (for Individual)
Fire Fighter / EMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 06 / 2018

C27125359

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wojtowicz,Steven,,,

Mailing Address 68 W Airmount Rd

City
Mahwah

State
NJ

Zip Code
074301719

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
North Hudson Fire Officers Fire Dept.

Occupation (for Individual)
Fire Fighter / EMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 09 / 2018

C27125276

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1500.00