

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 OF 104

(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. MacKinnon, Richard,,,

Mailing Address 9 Oakdale Farm Rd

City  
Whitman

State  
MA

Zip Code  
023821657

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Whitman Fire Dept.

Occupation (for Individual)  
Fire Fighter / EMS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

MM / DD / YYYY  
01 / 08 / 2018

C27124222

Amount of Each Receipt this Period

750.00

☐ Memo Item

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

B. Bayne, Jeffrey,,,

Mailing Address 4725 SW 109th Ter

City  
Davie

State  
FL

Zip Code  
333283238

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Fort Lauderdale Fire Dept.

Occupation (for Individual)  
Fire Fighter / EMS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

MM / DD / YYYY  
01 / 25 / 2018

C27124102

Amount of Each Receipt this Period

750.00

☐ Memo Item

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

C. Simac, Steve,,,

Mailing Address 4712 SW Bimini Cir N

City  
Palm City

State  
FL

Zip Code  
349901234

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Fort Lauderdale Fire Dept.

Occupation (for Individual)  
Fire Fighter / EMS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

0.00

Date of Receipt

MM / DD / YYYY  
01 / 16 / 2018

C27124035

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)..... ►

2000.00