REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

FEB 3 11 17 AM '94

ADDRESS (number and street) Check if different than previously reported
P. O. BOX 5524

CITY, STATE and ZIP CODE
ARLINGTON, TEXAS 76005-5524

2. FEC IDENTIFICATION NUMBER
C 00-26-78 49

3. This committee qualified as a multicandidate committee DURING THIS Reporting Period (date).

4. TYPE OF REPORT

(a) April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

XX January 31 Year End Report

July 31 Mid Year Report (Non-election Year Only)

Terminal on Report

Monthly Report Due On:

February 20	June 20	October 20
March 20	July 20	November 20
April 20	August 20	December 20
May 20	September 20	January 31

Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

Thirtieth day report following the General Election on _____ in the State of _____.

(b) Is this Report an Amendment? YES XX NO

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5	Covering Period 07/01/93 through 12/31/93		
6	(a) Cash on hand January 1, 19 93		$ 4,046.00
	(b) Cash on Hand at Beginning of Reporting Period	$ 23,470.14	
	(c) Total Receipts (from Line 19)	$ 35,243.96	$ 56,668.10
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$	$
7	Total Disbursements (from Line 30)	$ 3,100.00	$ 5,100.00
8	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 55,614.10	$ 55,614.10
9	Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	$	
10.	Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800 424 9530
Local 202 376 3120

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
JOSEPH D. SELLERS, II

Signature of Treasurer
Joseph D. Sellers, II

Date
01/31/94

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3X

(revised 1/1/91)

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

REPORT COVERING PERIOD FROM 07/01/93 TO: 12/31/93

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individuals/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	1,141.00	1,591.00
ii. Unitemized	33,756.00	54,704.00
iii. Total (add i and ii) ➤	34,897.00	56,295.00
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a iii, b and c) ➤	34,897.00	56,295.00
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)	346.96	373.10
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	35,243.96	56,668.10
20. Total Federal Receipts (subtract line 18 from line 19) ➤	35,243.96	56,668.10
II. Disbursements		
21. Operating Expenditures		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures		
c. Total Operating Expenditures (Add a i, a ii, and b) ➤		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	3,100.00	5,100.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To		
a. Individuals/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (Add a, b and c) ➤		
29. Other Disbursements		
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	3,100.00	5,100.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	3,100.00	5,100.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	34,897.00	56,295.00
33. Total Contribution Refunds (from line 28d)		
34. Net Contributions (other than loans) (subtract line 33 from 32)	34,897.00	56,295.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤		
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures (subtract line 36 from 35) ➤		

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 7

FOR LINE NUMBER 11 A1

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NAME OF COMMITTEE (In Full)
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
STONER, MARVIN 6205 WATERVIEW DR ARLINGTON ,TX 76016 2049 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 200.00	Payroll Deduction	25.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
FULLERTON, ROBERT 11 STONEDAM ISLAND RD MEREDITH ,NH 03253-6820 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 300.00	Payroll Deduction	25.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
EHRLICH, JOHN 140 CHESTNUT DR WAYNE ,NJ 07470-5602 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 275.00	Payroll Deduction	25.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
MILLER, DONALD 7127 KATE DR HUDSON ,OH 44236-4233 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 220.00	Payroll Deduction	20.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
ARNDT, RICHARD 50 CANTERBURY LN WILTON ,CT 06897-4104 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 200.00	Payroll Deduction	25.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
CRUMMOND, DAVID 1 CRANE CT MANALAPAN ,NJ 07726-3626 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 825.00	Payroll Deduction	75.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

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

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

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
WARD, PETER 164 1/2 MAPLE ST DANVERS ,MA 01923-2137 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 300.00	Payroll Deduction	10.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
JONES, NORM # 1-365 DALLAS ,TX 75240-5236 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 300.00	Payroll Deduction	25.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
TOBIN, RICHARD 2330 MATHER RD MC KINLEYVILLE ,CA 95521-9463 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 220.00	Payroll Deduction	20.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
RICHARDSON, JOHN 912 WHANN AVE MCLEAN ,VA 22101-1538 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 300.00	Payroll Deduction	25.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
VORAS, ALBERT 3000 BROOKVIEW LN PALATINE ,IL 60067-7309 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 220.00	Payroll Deduction	20.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
WASLRTTRN, ANDREW 3806 HAMPTON RD DENTON ,TX 76201-3230 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 300.00	Payroll Deduction	25.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

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

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

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 7

FOR LINE NUMBER 11-A1

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NAME OF COMMITTEE (in Full): ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
SIMMONDS, DONALD PO BOX 282 BONSALL ,CA 92003-0282 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 220.00	Payroll Deduction	20.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
HENSON, HOWARD 400 FLINTRIDGE CT IRVING ,TX 75038-4834 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 250.00	Payroll Deduction	25.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
GRUNDELAND, HAROLD 22 BLOOMER DR BURLINGTON ,NJ 08016-3689 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 1100.00	Payroll Deduction	100.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
PARKER, BIGELOW 2341 N STAGE COACH LN FALLBROOK ,CA 92028-9743 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 300.00	Payroll Deduction	25.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
SNELLING, THOMAS 1604 HUNTINGDON CHASE DUNWOODY ,GA 30350-4931 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 220.00	Payroll Deduction	20.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
ALDERSON, STEPHEN PO BOX 401 LITCHFIELD ,IL 62056-0401 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 300.00	Payroll Deduction	25.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

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PAGE 4 OF /

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TARPENNING, CORY 31224 EONA CIR TEMECULA ,CA 92592-5707 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 275.00	Payroll Deduction	25.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
MICHAELSEN, KENT 38 SAWYER RD HAMPSTEAD ,NH 03841-2130 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 240.00	Payroll Deduction	20.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
MCCLELLAND, DOUGLAS 1932 RANCHO VERDE CTR E DANVILLE ,CA 94526-6220 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 275.00	Payroll Deduction	25.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
BOWEN, MICHAEL 341 N HOMESTEAD DR LANDISVILLE ,PA 17538-1377 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 600.00	Payroll Deduction	50.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
GORE, WILLIAM 938 E. WIMBLEDON DR. FRESNO ,CA 93720-1355 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 240.00	Payroll Deduction	20.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
SPENCER, MORRIS 4599 MOUNT GILEAD CHURCH RD SOPHIA ,NC 27350-8835 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 220.00	Payroll Deduction	20.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

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A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
CLAYTON, PHILIP # 260 ARLINGTON, VA 22204 4842 Receipt For: Primary General Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 250.00	Payroll Deduction	20.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
SEIFERT, RONALD 124 BOSCOBEL RD FREDERICKSBURG, VA 22405-6143 Receipt For: Primary General Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 210.00	Payroll Deduction	21.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
EDWARDS, JOEL 875 LAKEVIEW DR BROOKFIELD, WI 53045-5665 Receipt For: Primary General Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 300.00	Payroll Deduction	25.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
GROSS, ROBERT PO BOX 5597 LIGHTHOUSE POINT, FL 33074 5597 Receipt For: Primary General Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 500.00	Payroll Deduction	50.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
KOLSTAD, RALPH 200 DEL RIO COURT IRVING, TX 75062-3919 Receipt For: Primary General Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 275.00	Payroll Deduction	25.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
WARE, PAUL 5901 190TH CT N JUPITER, FL 33458-2450 Receipt For: Primary General Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 275.00	Payroll Deduction	25.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify):	Aggregate Year-to-Date > $		

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

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
WATKINS,JEFFREY 720 BRADWELL RD HARRINGTON ,IL 60010-5601 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines,Inc Airline Pilot Aggregate Year-to-Date > $ 275.00	Payroll Deduction	25.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
HALL,DANIEL 727 APPLERIDGE DRIVE ENCINITAS, ,CA 92024 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines,Inc Airline Pilot Aggregate Year-to-Date > $ 240.00	Payroll Deduction	20.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
CUTTER,JOHN 191 BRIDGEPORT DR HALF MOON BAY ,CA 94019-4236 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines,Inc Airline Pilot Aggregate Year-to-Date > $ 550.00	Payroll Deduction	50.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
WELLER,GARY 1687 NICKERSON WAY ARNOLD ,MD 21012-2567 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines,Inc Airline Pilot Aggregate Year-to-Date > $ 300.00	Payroll Deduction	25.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
SCHLEGEL,DUANE 1122 B NORTH TAYLOR ST. ARLINGTON ,VA 22201-4788 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines,Inc Airline Pilot Aggregate Year-to-Date > $ 220.00	Payroll Deduction	20.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
ESTES,RICHARD 405 INLAND CIR AZLE ,TX 76020-4908 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines,Inc Airline Pilot Aggregate Year-to-Date > $ 220.00	Payroll Deduction	20.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUB TOTAL of Receipts This Page (optional) . . . . . >

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full): ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
IGELSRUD, JON 2500 NE 32ND AVE FORT LAUDERDALE ,FL 33305-186 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 275.00	Payroll Deduction	25.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
HILL, JODY 3135 SUMATRA PL COSTA MESA ,CA 92626-2336 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 600.00	Payroll Deduction	50.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
REED, 2925 CORAL SHORES DR FORT LAUDERDALE ,FL 33306-1257 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 240.00	Payroll Deduction	20.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
CONSTDINE, MARTIN 1295 WOOD ROW WAY WEST PALM BEA ,FL 33414-9023 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date > $ 275.00	Payroll Deduction	25.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) >

TOTAL This Period (last page this line number only) > 1,141.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
CONGRESSMAN PETER HOAGLAND FEDERAL BLDG ROOM 8424 OMAHA , NE 68102	HOAGLAND FOR CONGRESS COMM Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10/29/93	1,000.00
CONGRESSMAN RON WYDEN 500 MULTNOMAH STREET PORTLAND, OR 97232-2032	WYDEN FOR CONGRESS COMM Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11/01/93	100.00
CONGRESSMAN RICHARD A GEPHARDT 9959 GRAVOIS AVENUE ST. LOUIS, MO 63123 4211	GEPHARDT IN CONGRESS COMM Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11/16/93	1,000.00
CONGRESSMAN THOMAS S. FOLEY W. 601 FIRST AVENUE SPOKANE, WA 99204	COMMITTEE TO RE-ELECT THOMAS FOLEY Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12/17/93	1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) 3,100.00

TOTAL This Period (last page this line number only) 3,100.00

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☑	First Class Mail	POSTMARKED 1-31-94
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☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
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JLB — PREPARER

2-3-94 — DATE PREPARED

FEC FORM 70-2 (12/92)