REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FEDERAL ELECTION COMMISSION MAIL ROOM

OCT 28 1 24 PM '94

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (Last Name)

C00267849 091994 P 236
~~JOSEPH O SELLERS II~~ WILLIAM L. SLIKKERVEER
ALLIED PILOTS ASSOCIATION POLI
TICAL ACTION COMMITTEE (AKA) A
PO BOX 3524
ARLINGTON TX 76005

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

3. ☐ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
XXXX INTERIM PRE-ELECTION REPORT
☐ Termination 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 General (Type of Election) election on 11/08/94 in the State of Texas

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

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period OCT. 1 1994 through OCT. 19 1994		
6. (a) Cash on Hand January 1, 1994		$ 55,614.10
(b) Cash on Hand at Beginning of Reporting Period	$89,038.16	
(c) Total Receipts (from Line 19)	$ 6,234.61	$ 58,705.42
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$95,272.77	$114,319.52
7. Total Disbursements (from Line 30)	$ 4,000.00	$ 23,046.75
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$91,272.77	$ 91,272.77
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 202-219-3420

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 WILLIAM L. SLIKKERVEER

Signature of Treasurer [signature]

Date 10-19-94

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 9/93)

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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 10-1-94 TO 10-19-94

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	1,125.00	10,703.00	11(a)(i)
ii. Unitemized	4,491.10	46,312.10	11(a)(ii)
iii. Total (add i and ii) ➤	5,616.10	57,015.10	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	5,616.10	57,015.10	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	618.51	1,690.32	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	6,234.61	58,705.42	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	6,234.61	58,705.42	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤			21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	4,000.00	23,000.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤		46.75	28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	4,000.00	23,046.75	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	4,000.00	23,046.75	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	5,616.10	58,705.42	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	5,616.10	58,705.42	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤			37

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 23

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)
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
THOMAS HARKIN U.S. HOUSE OF REPRESENTATIVES WASHINGTON, DC 20515	HARKIN FOR CONGRESS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/10/94	$1,000.00
B. Full Name, Mailing Address and ZIP Code JOHN DINGELL US HOUSE OF REPRESENTATIVES WASHINGTON, DC 20515	Purpose of Disbursement JOHN DINGELL FOR CONGRESS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/10/94	Amount of Each Disbursement This Period $1,000.00
C. Full Name, Mailing Address and ZIP Code FRED THOMPSON 1808 W. END AVE #901 NASHVILLE, TN 37203	Purpose of Disbursement TENNESSEANS FOR THOMPSON Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/10/.94	Amount of Each Disbursement This Period $1,000.00
D. Full Name, Mailing Address and ZIP Code CHARLES ROBB US HOUSE OF REPRESENTATIVES WASHINGTON, DC 20515	Purpose of Disbursement CHUCK ROBB FOR SENATE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/10/94	Amount of Each Disbursement This Period $1,000.00
E. 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
F. 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
G. 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
H. 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
I. 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)	
TOTAL This Period (last page this line number only)	$4,000.00

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 6

FOR LINE NUMBER 11 A i

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NAME OF COMMITTEE (In Full)
Allied Pilots Association Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. STONER, MARVIN 6205 WATERVIEW DR/ ARLINGTON, TX 76016-2049 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date $ 250.00	Payroll Deduction	25.00 (25 Per Month)
B. 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 $ 250.00	Payroll Deduction	25.00 (25 Per Month)
C. EHRLICH, JOHN 140 CHESTNUT DR/ WAYNE, NJ 07470-5602 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date $ 250.00	Payroll Deduction	25.00 (25 Per Month)
D. MILLER, DONALD 7127 KATE DR/ HUDSON, OH 44236-4233 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date $ 200.00	Payroll Deduction	20.00 (20 Per Month)
E. ARNDT, RICHARD 50 CANTERBURY LN/ WILTON, CT 06897-4104 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date $ 250.00	Payroll Deduction	25.00 (25 Per Month)
F. DRUMMOND, DAVID 1 CRANE CT/ MANALAPAN, NJ 07726-3626 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date $ 750.00	Payroll Deduction	75.00 (75 Per Month)
G. JONES, NORM # 1-365/13410 PRESTON RD DALLAS, TX 75240-5236 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date $ 250.00	Payroll Deduction	25.00 (25 Per Month)

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

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allied Pilots Association Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. TOBIN,RICHARD 2330 MATHER RD/ MC KINLEYVILLE, CA 95521-9663 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines,Inc Airline Pilot Aggregate Year-to-Date $ 200.00	Payroll Deduction	20.00 (20 Per Month)
B. RICHARDSON,JOHN 912 WHANN AVE/ MCLEAN, VA 22101-1538 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines,Inc Airline Pilot Aggregate Year-to-Date $ 250.00	Payroll Deduction	25.00 (25 Per Month)
C. AASLETTEN,ANDREW 3806 Hampton Road/ DENTON, TX 76201-3250 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines,Inc Airline Pilot Aggregate Year-to-Date $ 250.00	Payroll Deduction	25.00 (25 Per Month)
D. SIMMONDS,DONALD PO BOX 282/ BONSALL, CA 92003-0282 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines,Inc Airline Pilot Aggregate Year-to-Date $ 200.00	Payroll Deduction	20.00 (20 Per Month)
E. 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 (25 Per Month)
F. GRUNDELAND,HAROLD 22 BLOOMER DR/ BURLINGTON, NJ 08016-3689 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines,Inc Airline Pilot Aggregate Year-to-Date $ 1,000.00	Payroll Deduction	100.00 (100 Per Month)
G. PARKER,BIGELOW 2541 W STAGE COACH LN/ FALLBROOK, CA 92028-9743 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines,Inc Airline Pilot Aggregate Year-to-Date $ 250.00	Payroll Deduction	25.00 (25 Per Month)

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

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

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NAME OF COMMITTEE (In Full)

Allied Pilots Association Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. SNELLING, THOMAS 1604 HUNTINGDON CHASE/ DUNWOODY, GA 30350-4931 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date $ 200.00	Payroll Deduction	20.00 (20 Per Month)
B. ALDERSON, STEPHEN PO BOX 401/ LITCHFIELD, IL 62056-0401 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date $ 250.00	Payroll Deduction	25.00 (25 Per Month)
C. ALDRICH, DAVID 221 CHASSE CIR/ SAINT CHARLES, IL 60174-5723 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date $ 200.00	Payroll Deduction	20.00 (20 Per Month)
D. TARPENNING, CORY 31224 EONA CIR/ TEMECULA, CA 92592-5701 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date $ 225.00	Payroll Deduction	25.00 (25 Per Month)
E. MICHAELSEN, KENT 38 SAWYER RD/ HAMPSTEAD, NH 03841-2130 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date $ 200.00	Payroll Deduction	20.00 (20 Per Month)
F. MCCLELLAND, DOUGLAS 547 CAMBRIAN WAY/ DANVILLE, CA 94526 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date $ 250.00	Payroll Deduction	25.00 (25 Per Month)
G. 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 $ 500.00	Payroll Deduction	50.00 (50 Per Month)

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

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

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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	Date (month, day, year)	Amount of Each Receipt this Period
GORE, WILLIAM 938 E. WINBLEDON DR./ FRESNO, CA 93720-1355	American Airlines, Inc	Payroll Deduction	20.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Active Pilot Aggregate Year-to-Date > $ 200.00		(20 Per Month)

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SPENCER, MORRIS 4599 MOUNT GILEAD CHURCH RD/ SOPHIA, NC 27350-8835	American Airlines, Inc	Payroll Deduction	20.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Active Pilot Aggregate Year-to-Date > $ 200.00		(20 Per Month)

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CLAYTON, PHILIP RT 2 BOX 120/ LEXINGTON, VA 24450	American Airlines, Inc	Payroll Deduction	20.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Active Pilot Aggregate Year-to-Date > $ 200.00		(20 Per Month)

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EDWARDS, JOEL 875 LAKEVIEW DR/#202 BROOKFIELD, WI 53045-5665	American Airlines, Inc	Payroll Deduction	25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Active Pilot Aggregate Year-to-Date > $ 250.00		(25 Per Month)

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GROSS, ROBERT 2720 NE 48TH CT/ LIGHTHOUSE POINT, FL 33064	American Airlines, Inc	Payroll Deduction	50.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Active Pilot Aggregate Year-to-Date > $ 500.00		(50 Per Month)

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KOLSTAD, RALPH 100 DEL RIO COURT/ IRVING, TX 75062-3019	American Airlines, Inc	Payroll Deduction	25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Active Pilot Aggregate Year-to-Date > $ 250.00		(25 Per Month)

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SICILIANO, DANIEL 2660 NE 48TH ST/ LIGHTHOUSE POINT, FL 33064-7112	American Airlines, Inc	Payroll Deduction	20.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Active Pilot Aggregate Year-to-Date > $ 200.00		(20 Per Month)

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

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

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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 Assocation Political Action Committee

Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code WATKINS,JEFFREY 720 BRADWELL RD/ BARRINGTON, IL 60010-5601 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: American Airlines,Inc Occupation: Airline Pilot Aggregate Year-to-Date > $ 250.00	Payroll Deduction	25.00 (25 Per Month)
B. Full Name, Mailing Address and ZIP Code HALL,Daniel 1579 Flamingo Circle/ SOUTHLAKE, TX 76092 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: American Airlines,Inc Occupation: Airline Pilot Aggregate Year-to-Date > $ 200.00	Payroll Deduction	20.00 (20 Per Month)
C. Full Name, Mailing Address and ZIP Code CUTTER,JOHN 191 BRIDGEPORT DR/ HALF MOON BAY, CA 94019-4236 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: American Airlines,Inc Occupation: Airline Pilot Aggregate Year-to-Date > $ 500.00	Payroll Deduction	50.00 (50 Per Month)
D. Full Name, Mailing Address and ZIP Code WELLER,GARY 1687 NICKERSON WAY/ ARNOLD, MD 21012-2567 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: American Airlines,Inc Occupation: Airline Pilot Aggregate Year-to-Date > $ 250.00	Payroll Deduction	25.00 (25 Per Month)
E. Full Name, Mailing Address and ZIP Code SCHLEGEL,DUANE 1122 B NORTH TAYLOR ST./ ARLINGTON, VA 22201-4788 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: American Airlines,Inc Occupation: Airline Pilot Aggregate Year-to-Date > $ 200.00	Payroll Deduction	20.00 (20 Per Month)
F. Full Name, Mailing Address and ZIP Code ESTES,RICHARD 401 ISLAND CIRCLE/ AZLE, TX 76020-4908 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: American Airlines,Inc Occupation: Airline Pilot Aggregate Year-to-Date > $ 200.00	Payroll Deduction	20.00 (20 Per Month)
G. Full Name, Mailing Address and ZIP Code IGELSRUD,JON 2500 NE 32ND AVE/ FORT LAUDERDALE, FL 33305-1863 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: American Airlines,Inc Occupation: Airline Pilot Aggregate Year-to-Date > $ 250.00	Payroll Deduction	25.00 (25 Per Month)

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

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

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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 Assocation Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. 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 $ 500.00	Payroll Deduction	50.00 (50 Per Month)
B. KRIGIC, MICHAEL 1429 SW 74TH AVE/ NORTH LAUDERDALE, FL 33068-3610 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date $ 200.00	Payroll Deduction	20.00 (20 Per Month)
C. 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 $ 200.00	Payroll Deduction	20.00 (20 Per Month)
D. CONSIDINE, MARTIN 1295 WOOD ROW WAY/ WELLINGTON, FL 33414-9023 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc Airline Pilot Aggregate Year-to-Date $ 250.00	Payroll Deduction	25.00 (25 Per Month)
E. Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		
F. Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		
G. Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		

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

TOTAL This Period (last page this line number only) $1,125.00

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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
☑	Registered/Certified Mail	POSTMARKED 10-24-94
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

MMR
PREPARER

10-28-94
DATE PREPARED

FEC FORM 70-2 (12/92)

9 4 0 3 3 7 4 0 1 6 0 9