

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 14600 Trinity Blvd  
Suite 500  
 Check if different than previously reported. (ACC)  
Fort Worth TX 76155 - 2512

2. **FEC IDENTIFICATION NUMBER** C00267849  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 07 01 2010 through 09 30 2010

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 SCOTT SHANKLAND, PAC TREASURER

Signature of Treasurer Electronically Filed by SCOTT SHANKLAND, PAC TREASURER Date 10 05 2010

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 9 |

|   |   |
|---|---|
| D | D |
| 3 | 0 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |           |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|-----------|
| 6. (a) Cash on Hand<br>January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> | Y                       | Y                                 | Y | Y | 2 | 0 | 1 | 0 |  | 674530.71 |
| Y   | Y                       | Y                                 | Y |   |   |   |   |   |  |           |
| 2   | 0                       | 1                                 | 0 |   |   |   |   |   |  |           |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 675619.02               |                                   |   |   |   |   |   |   |  |           |
| (c) Total Receipts (from Line 19) .....   | 33766.47                | 100622.78                         |   |   |   |   |   |   |  |           |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....  | 709385.49               | 775153.49                         |   |   |   |   |   |   |  |           |
| 7. Total Disbursements (from Line 31) .....   | 36500.00                | 102268.00                         |   |   |   |   |   |   |  |           |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | 672885.49               | 672885.49                         |   |   |   |   |   |   |  |           |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | 0.00                    |                                   |   |   |   |   |   |   |  |           |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |   |   |   |   |   |   |  |           |

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

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 9 |

|   |   |
|---|---|
| D | D |
| 3 | 0 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  |                               |                                   |
| (i) Itemized (use Schedule A) .....  | 2312.00                       | 3187.00                           |
| (ii) Unitemized .....  | 31445.25                      | 96719.43                          |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 33757.25                      | 99906.43                          |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....  | 0.00                          | 0.00                              |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....     | 33757.25                      | 99906.43                          |
| 12. Transfers From Affiliated/Other Party Committees .....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....   | 0.00                          | 0.00                              |
| 14. Loan Repayments Received .....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) ..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 9.22                          | 716.35                            |
| 18. Transfers from Non-Federal and Levin Funds   |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....   | 0.00                          | 0.00                              |
| (c) Total Transfer (add 18(a) and 18(b)).  | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                          | 33766.47                      | 100622.78                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 33766.47                      | 100622.78                         |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

| <b>II. DISBURSEMENTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 21. Operating Expenditures:  |                                       |   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                     |                                       |   |
| (i) Federal Share.....   | 0.00                                  | 0.00                                      |
| (ii) Non-Federal Share.....  | 0.00                                  | 0.00                                      |
| (b) Other Federal Operating Expenditures.....  | 0.00                                  | 1903.00                                   |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶                        | 0.00                                  | 1903.00                                   |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                                  | 0.00                                      |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 36500.00                              | 92100.00                                  |
| 24. Independent Expenditure (use Schedule E) .....   | 0.00                                  | 0.00                                      |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00                                  | 0.00                                      |
| 26. Loan Repayments Made.....  | 0.00                                  | 0.00                                      |
| 27. Loans Made.....  | 0.00                                  | 0.00                                      |
| 28. Refunds of Contributions To:   |                                       |   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                                  | 3265.00                                   |
| (b) Political Party Committees   | 0.00                                  | 0.00                                      |
| (c) Other Political Committees (such as PACs) .....  | 0.00                                  | 0.00                                      |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                           | 0.00                                  | 3265.00                                   |
| 29. Other Disbursements.....   | 0.00                                  | 5000.00                                   |
| 30. Federal Election Activity (2 U.S.C 431(20))  |                                       |   |
| (a) Shared Federal Election Activity (from Schedule H6)  |                                       |   |
| (i) Federal Share .....  | 0.00                                  | 0.00                                      |
| (ii) "Levin" Share .....   | 0.00                                  | 0.00                                      |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                                  | 0.00                                      |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....              | 0.00                                  | 0.00                                      |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..       | 36500.00                              | 102268.00                                 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 36500.00                              | 102268.00                                 |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 33757.25                      | 99906.43                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 3265.00                           |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 33757.25                      | 96641.43                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 0.00                          | 1903.00                           |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 0.00                          | 1903.00                           |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 21  
(check only one)

|   |                              |                              |   |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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 (Last, First, Middle Initial)  
Stephen A. Alderson

Mailing Address PO Box 401

City Litchfield State IL Zip Code 62056-0401

FEC ID number of contributing federal political committee. C

Name of Employer American Airlines Occupation Airline Pilot

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2010

**Transaction ID:** SA11AI.99816

Amount of Each Receipt this Period 75.00

**B.** Full Name (Last, First, Middle Initial)  
Jon L. Boyce

Mailing Address 1712 Downs St

City Oceanside State CA Zip Code 92054-6191

FEC ID number of contributing federal political committee. C

Name of Employer American Airlines Occupation Airline Pilot

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2010

**Transaction ID:** SA11AI.99926

Amount of Each Receipt this Period 75.00

**C.** Full Name (Last, First, Middle Initial)  
Robert P. Coffman

Mailing Address PO Box 580

City Bigfork State MT Zip Code 59911-0580

FEC ID number of contributing federal political committee. C

Name of Employer American Airlines Occupation Airline Pilot

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 278.00

Date of Receipt 09 / 30 / 2010

**Transaction ID:** SA11AI.100018

Amount of Each Receipt this Period 158.00

**SUBTOTAL** of Receipts This Page (optional) ..... 308.00

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

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 7 / 21                  |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

|   |   |                             |   |
|---|---|-----------------------------|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Martin P. Considine      |                             | Date of Receipt   |
|   | Mailing Address 1295 Wood Row Way                                   |                             | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y<br>09 / 30 / 2010 |
|   | City  | State                       | Zip Code  |
|   | West Palm Beach   | FL                          | 33414-9023  |
|   | FEC ID number of contributing federal political committee. <b>C</b> |                             | Transaction ID: SA11AI.100030   |
| Name of Employer<br>American Airlines   |   | Occupation<br>Airline Pilot | Amount of Each Receipt this Period  |
| Receipt For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼    | <input type="text"/> 75.00  |
|   |   | <input type="text"/> 225.00 |   |

|   |   |                             |   |
|---|---|-----------------------------|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Joseph R. Cook           |                             | Date of Receipt   |
|   | Mailing Address 532 Marina Ave                                      |                             | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y<br>09 / 30 / 2010 |
|   | City  | State                       | Zip Code  |
|   | Coronado  | CA                          | 92118-2716  |
|   | FEC ID number of contributing federal political committee. <b>C</b> |                             | Transaction ID: SA11AI.100032   |
| Name of Employer<br>American Airlines   |   | Occupation<br>Airline Pilot | Amount of Each Receipt this Period  |
| Receipt For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼    | <input type="text"/> 75.00  |
|   |   | <input type="text"/> 225.00 |   |

|   |   |                             |   |
|---|---|-----------------------------|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Donald C. Cruikshank     |                             | Date of Receipt   |
|   | Mailing Address 7194 Baldwin Ridge Rd                               |                             | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y<br>09 / 30 / 2010 |
|   | City  | State                       | Zip Code  |
|   | Warrenton   | VA                          | 20187-9180  |
|   | FEC ID number of contributing federal political committee. <b>C</b> |                             | Transaction ID: SA11AI.100044   |
| Name of Employer<br>American Airlines   |   | Occupation<br>Airline Pilot | Amount of Each Receipt this Period  |
| Receipt For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼    | <input type="text"/> 114.00   |
|   |   | <input type="text"/> 204.00 |   |

|  |                             |
|--|-----------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text"/> 264.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text"/>        |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 21  
(check only one)

|   |                              |                              |   |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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

**A.**

Full Name (Last, First, Middle Initial)  
William A. Gray

Mailing Address PO Box 2234

City Somerset State NJ Zip Code 08875-2234

FEC ID number of contributing federal political committee. **C**

Name of Employer American Airlines Occupation Airline Pilot

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2010  
**Transaction ID: SA11AI.100244**  
Amount of Each Receipt this Period 75.00

**B.**

Full Name (Last, First, Middle Initial)  
Daniel W. Hall

Mailing Address 727 Appleridge Dr

City Encinitas State CA Zip Code 92024-4708

FEC ID number of contributing federal political committee. **C**

Name of Employer American Airlines Occupation Airline Pilot

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2010  
**Transaction ID: SA11AI.100261**  
Amount of Each Receipt this Period 75.00

**C.**

Full Name (Last, First, Middle Initial)  
Jr Robert L. Huguley

Mailing Address 43131 Kimberley Ct

City Leesburg State VA Zip Code 20176-6489

FEC ID number of contributing federal political committee. **C**

Name of Employer American Airlines Occupation Airline Pilot

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2010  
**Transaction ID: SA11AI.100356**  
Amount of Each Receipt this Period 75.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **225.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

|   |                              |
|---|------------------------------|
| FOR LINE NUMBER:                        | PAGE 9 / 21                  |
| (check only one)                        |                              |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
| <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
| <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
| <input type="checkbox"/>                | <input type="checkbox"/> 17  |

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

|  |   |                             |   |
|--|---|-----------------------------|---|
| <b>A.</b>  | Full Name (Last, First, Middle Initial)<br>Craig L. Johnson |                             | Date of Receipt   |
|  | Mailing Address 4245 Colony Ter                             |                             | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y |
|  | City  | State                       | Zip Code  |
|  | Encinitas   | CA                          | 92024-4901  |
|  | FEC ID number of contributing federal political committee.  |                             | Transaction ID: SA11AI.100379   |
|  | C <input type="text"/>                                      |                             | Amount of Each Receipt this Period  |
| Name of Employer<br>American Airlines  |   | Occupation<br>Airline Pilot | <input type="text"/>  |
| Receipt For: 2010  |   | Aggregate Year-to-Date ▼    | 75.00   |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |   | <input type="text"/>        | 225.00  |
| <input type="checkbox"/> Other (specify) ▼                                   |   |                             |   |

|  |  |                             |   |
|--|--|-----------------------------|---|
| <b>B.</b>  | Full Name (Last, First, Middle Initial)<br>Dana R. MacKimmie |                             | Date of Receipt   |
|  | Mailing Address 7854 Trafalgar Pl                            |                             | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y |
|  | City   | State                       | Zip Code  |
|  | Warrenton  | VA                          | 20186-9717  |
|  | FEC ID number of contributing federal political committee.   |                             | Transaction ID: SA11AI.100504   |
|  | C <input type="text"/>                                       |                             | Amount of Each Receipt this Period  |
| Name of Employer<br>American Airlines  |  | Occupation<br>Airline Pilot | <input type="text"/>  |
| Receipt For: 2010  |  | Aggregate Year-to-Date ▼    | 75.00   |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |  | <input type="text"/>        | 225.00  |
| <input type="checkbox"/> Other (specify) ▼                                   |  |                             |   |

|  |  |                             |   |
|--|--|-----------------------------|---|
| <b>C.</b>  | Full Name (Last, First, Middle Initial)<br>Eric AC. Markl  |                             | Date of Receipt   |
|  | Mailing Address 403 Rockwood Rd                            |                             | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y |
|  | City   | State                       | Zip Code  |
|  | Wilmington   | DE                          | 19802-1237  |
|  | FEC ID number of contributing federal political committee. |                             | Transaction ID: SA11AI.100523   |
|  | C <input type="text"/>                                     |                             | Amount of Each Receipt this Period  |
| Name of Employer<br>American Airlines  |  | Occupation<br>Airline Pilot | <input type="text"/>  |
| Receipt For: 2010  |  | Aggregate Year-to-Date ▼    | 90.00   |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |  | <input type="text"/>        | 270.00  |
| <input type="checkbox"/> Other (specify) ▼                                   |  |                             |   |

|  |                      |
|--|----------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text"/> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text"/> |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 21

(check only one)

|   |                              |                              |   |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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

|           |   |                                    |   |   |  |
|-----------|---|------------------------------------|---|---|--|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Mike G. McClellan  |                                    | Date of Receipt<br>MM / DD / YYYY<br>09 / 30 / 2010 |   |  |
|           | Mailing Address 1554 Bobolink Cir   |                                    | <b>Transaction ID:</b> SA11AI.100564                |   |  |
|           | City<br>Woodstock   | State<br>IL                        | Zip Code<br>60098-8075                              | Amount of Each Receipt this Period<br>75.00 |  |
|           | FEC ID number of contributing federal political committee.<br>C   |                                    |   |   |  |
|           | Name of Employer<br>American Airlines   | Occupation<br>Airline Pilot        |   |   |  |
|           | Receipt For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>225.00 |   |   |  |

|           |   |                                    |   |   |  |
|-----------|---|------------------------------------|---|---|--|
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Francis H. McGill  |                                    | Date of Receipt<br>MM / DD / YYYY<br>09 / 30 / 2010 |   |  |
|           | Mailing Address 8105 Crestview Ct   |                                    | <b>Transaction ID:</b> SA11AI.100575                |   |  |
|           | City<br>Gilroy  | State<br>CA                        | Zip Code<br>95020-9421                              | Amount of Each Receipt this Period<br>75.00 |  |
|           | FEC ID number of contributing federal political committee.<br>C   |                                    |   |   |  |
|           | Name of Employer<br>American Airlines   | Occupation<br>Airline Pilot        |   |   |  |
|           | Receipt For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>225.00 |   |   |  |

|           |   |                                    |   |   |  |
|-----------|---|------------------------------------|---|---|--|
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Brian K. Pattillo  |                                    | Date of Receipt<br>MM / DD / YYYY<br>09 / 30 / 2010 |   |  |
|           | Mailing Address 316 New Rye Rd  |                                    | <b>Transaction ID:</b> SA11AI.100727                |   |  |
|           | City<br>Epsom   | State<br>NH                        | Zip Code<br>03234-4512                              | Amount of Each Receipt this Period<br>75.00 |  |
|           | FEC ID number of contributing federal political committee.<br>C   |                                    |   |   |  |
|           | Name of Employer<br>American Airlines   | Occupation<br>Airline Pilot        |   |   |  |
|           | Receipt For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>225.00 |   |   |  |

|  |   |        |
|--|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 225.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |        |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 21  
(check only one)

|                                     |     |                          |     |                          |     |                          |    |                          |    |                          |    |                          |    |                          |    |                          |    |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|
| <input checked="" type="checkbox"/> | 11a | <input type="checkbox"/> | 11b | <input type="checkbox"/> | 11c | <input type="checkbox"/> | 12 | <input type="checkbox"/> | 13 | <input type="checkbox"/> | 14 | <input type="checkbox"/> | 15 | <input type="checkbox"/> | 16 | <input type="checkbox"/> | 17 |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|

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

**A.**

Full Name (Last, First, Middle Initial)  
James E. Perry

Mailing Address 12166 NW 9th Pl

City State Zip Code  
Coral Springs FL 33071-5011

FEC ID number of contributing federal political committee. **C**

Name of Employer American Airlines Occupation Airline Pilot

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2010

**Transaction ID:** SA11AI.100749

Amount of Each Receipt this Period  
105.00

**B.**

Full Name (Last, First, Middle Initial)  
William S. Pope

Mailing Address 4569 18th St # 3

City State Zip Code  
San Francisco CA 94114-1831

FEC ID number of contributing federal political committee. **C**

Name of Employer American Airlines Occupation Airline Pilot

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2010

**Transaction ID:** SA11AI.100776

Amount of Each Receipt this Period  
75.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert C. Pritchard

Mailing Address 11648 Hixon Pike

City State Zip Code  
Soddy Daisy TN 37379-6316

FEC ID number of contributing federal political committee. **C**

Name of Employer American Airlines Occupation Airline Pilot

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2010

**Transaction ID:** SA11AI.100785

Amount of Each Receipt this Period  
75.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **255.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 21

(check only one)

|   |                              |                              |   |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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

**A.**

Full Name (Last, First, Middle Initial)

Donald L. Schoppely

Mailing Address 1S727 Macarthur Dr

City State Zip Code  
Oakbrook Terrace IL 60181-4424

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
American Airlines Airline Pilot

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.100881

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

Andrew E. Sizemore

Mailing Address 209 E 2nd St

City State Zip Code  
Franklin OH 45005-2204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
American Airlines Airline Pilot

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.100920

Amount of Each Receipt this Period

0.00

**C.**

Full Name (Last, First, Middle Initial)

Cory D. Tarpenning

Mailing Address 31224 Eona Cir

City State Zip Code  
Temecula CA 92592-5701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
American Airlines Airline Pilot

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.100999

Amount of Each Receipt this Period

75.00

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

150.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 21  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Todd J. Trescott

Mailing Address 1866 Heritage Way

City Yountville State CA Zip Code 94599-9404

FEC ID number of contributing federal political committee. **C**

Name of Employer American Airlines Occupation Airline Pilot

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2010  
**Transaction ID:** SA11AI.101027  
 Amount of Each Receipt this Period 120.00

**B.** Full Name (Last, First, Middle Initial)  
Scott R. Trommer

Mailing Address 550 Edinburgh Cir

City Danville State CA Zip Code 94526-2903

FEC ID number of contributing federal political committee. **C**

Name of Employer American Airlines Occupation Airline Pilot

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2010  
**Transaction ID:** SA11AI.101030  
 Amount of Each Receipt this Period 75.00

**C.** Full Name (Last, First, Middle Initial)  
Rhett D. Tucker

Mailing Address 3700 Guadalajara Ct

City Irving State TX Zip Code 75062-6528

FEC ID number of contributing federal political committee. **C**

Name of Employer American Airlines Occupation Airline Pilot

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2010  
**Transaction ID:** SA11AI.101035  
 Amount of Each Receipt this Period 75.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 270.00

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

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

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 14 / 21                 |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                       | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12   | <input type="checkbox"/> 13  | <input type="checkbox"/> 14  |
| <input type="checkbox"/> 15   | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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

**A.**

|  |                             |   |
|--|-----------------------------|---|
| Full Name (Last, First, Middle Initial)<br>William O. Young                  |                             | Date of Receipt   |
| Mailing Address 4195 Fox Run Ct  |                             | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y<br>09 / 30 / 2010 |
| City   | State                       | Zip Code  |
| Weston   | FL                          | 33331-4001  |
| FEC ID number of contributing federal political committee.                   |                             | Transaction ID: SA11AI.101148   |
| C <input type="text"/>   |                             | Amount of Each Receipt this Period  |
|  |                             | <input type="text"/> 300.00   |
| Name of Employer<br>American Airlines  | Occupation<br>Airline Pilot |   |
| Receipt For: 2010  | Aggregate Year-to-Date ▼    |   |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | <input type="text"/> 800.00 |   |
| <input type="checkbox"/> Other (specify) ▼                                   |                             |   |

**B.**

|  |                             |   |
|--|-----------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Stephen M. Zoerlein               |                             | Date of Receipt   |
| Mailing Address 6N618 Heritage Ct  |                             | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y<br>09 / 30 / 2010 |
| City   | State                       | Zip Code  |
| Saint Charles  | IL                          | 60175-5449  |
| FEC ID number of contributing federal political committee.                   |                             | Transaction ID: SA11AI.101156   |
| C <input type="text"/>   |                             | Amount of Each Receipt this Period  |
|  |                             | <input type="text"/> 75.00  |
| Name of Employer<br>American Airlines  | Occupation<br>Airline Pilot |   |
| Receipt For: 2010  | Aggregate Year-to-Date ▼    |   |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | <input type="text"/> 225.00 |   |
| <input type="checkbox"/> Other (specify) ▼                                   |                             |   |

|  |                              |
|--|------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text"/> 375.00  |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text"/> 2312.00 |

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 21

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

|  |   |
|--|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>BOCCIERI FOR CONGRESS 2010</p> <p>Mailing Address PO Box 3016</p> <p>City Alliance State OH Zip Code 44601</p> <p>Purpose of Disbursement<br/>CK 5189</p> <p>Candidate Name<br/>BOCCIERI FOR CONGRESS 2010</p> <p>Office Sought: <input checked="" type="checkbox"/> House<br/><input type="checkbox"/> Senate<br/><input type="checkbox"/> President</p> <p>State: OH District: 16</p> <p>Disbursement For: 2010<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> SB23.101174</p> <p>Date of Disbursement<br/>09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period<br/>4000.00</p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>BOSWELL FOR CONGRESS/2010</p> <p>Mailing Address PO Box 6220</p> <p>City Des Moines State IA Zip Code 50309</p> <p>Purpose of Disbursement<br/>CK 5179</p> <p>Candidate Name<br/>BOSWELL FOR CONGRESS/2010</p> <p>Office Sought: <input checked="" type="checkbox"/> House<br/><input type="checkbox"/> Senate<br/><input type="checkbox"/> President</p> <p>State: IA District: 03</p> <p>Disbursement For: 2010<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> SB23.101186</p> <p>Date of Disbursement<br/>08 / 03 / 2010</p> <p>Amount of Each Disbursement this Period<br/>5000.00</p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>CITIZENS FOR ALTMIRE 2010</p> <p>Mailing Address P.O. Box 1776</p> <p>City Freedom State PA Zip Code 15042</p> <p>Purpose of Disbursement<br/>CK 5177</p> <p>Candidate Name<br/>CITIZENS FOR ALTMIRE 2010</p> <p>Office Sought: <input type="checkbox"/> House<br/><input type="checkbox"/> Senate<br/><input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>                   | <p><b>Transaction ID:</b> SB23.101159</p> <p>Date of Disbursement<br/>08 / 03 / 2010</p> <p>Amount of Each Disbursement this Period<br/>2500.00</p> |

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

11500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

|  |   |
|--|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>COLLINS FOR SENATOR 2010</p> <p>Mailing Address PO BOX 1096</p> <p>City BANGOR State ME Zip Code 04402</p> <p>Purpose of Disbursement CK 5180</p> <p>Candidate Name COLLINS FOR SENATOR 2010</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: ME District: 00</p> <p>Disbursement For: 2010<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>                      | <p><b>Transaction ID:</b> SB23.101165</p> <p>Date of Disbursement<br/>08 / 03 / 2010</p> <p>Amount of Each Disbursement this Period<br/>1000.00</p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>FRIENDS OF JIM OBERSTAR 2010</p> <p>Mailing Address 424 Warner Street NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement CK 5185</p> <p>Candidate Name FRIENDS OF JIM OBERSTAR 2010</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: MN District: 08</p> <p>Disbursement For: 2010<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> SB23.101170</p> <p>Date of Disbursement<br/>08 / 03 / 2010</p> <p>Amount of Each Disbursement this Period<br/>1000.00</p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>FRIENDS OF JIM OBERSTAR 2010</p> <p>Mailing Address 424 Warner Street NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement CK 5191</p> <p>Candidate Name FRIENDS OF JIM OBERSTAR 2010</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: MN District: 08</p> <p>Disbursement For: 2010<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> SB23.101176</p> <p>Date of Disbursement<br/>09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period<br/>4000.00</p> |

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

6000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

|  |   |
|--|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>FRIENDS OF JOHN BOEHNER 2010</p> <p>Mailing Address 7908 Cincinnati Dayton Road<br/>Suite I-2</p> <p>City West Chester State OH Zip Code 45069</p> <p>Purpose of Disbursement<br/>CK 5178</p> <p>Candidate Name<br/>FRIENDS OF JOHN BOEHNER 2010</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: OH District: 08</p> <p>Disbursement For: 2010<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>                          | <p><b>Transaction ID:</b> SB23.101160<br/><b>Date of Disbursement</b><br/>08 / 03 / 2010</p> <p>Amount of Each Disbursement this Period<br/>2500.00</p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>GARAMENDI FOR CONGRESS 2010</p> <p>Mailing Address c/o California Political Law, Inc.<br/>3605 Long Beach Blvd., Ste. 426</p> <p>City Long Beach State CA Zip Code 90807</p> <p>Purpose of Disbursement<br/>CK 5181</p> <p>Candidate Name<br/>GARAMENDI FOR CONGRESS 2010</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: CA District: 10</p> <p>Disbursement For: 2010<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> SB23.101166<br/><b>Date of Disbursement</b><br/>08 / 03 / 2010</p> <p>Amount of Each Disbursement this Period<br/>1000.00</p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>HARRY MITCHELL FOR CONGRESS 2010</p> <p>Mailing Address PO Box 23748</p> <p>City Tempe State AZ Zip Code 85285</p> <p>Purpose of Disbursement<br/>CK 5190</p> <p>Candidate Name<br/>HARRY MITCHELL FOR CONGRESS 2010</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: AZ District: 05</p> <p>Disbursement For: 2010<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>  | <p><b>Transaction ID:</b> SB23.101175<br/><b>Date of Disbursement</b><br/>09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period<br/>1000.00</p> |

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

|  |  |
|--|--|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>HOYER FOR CONGRESS 2010<br><hr/> Mailing Address 7905 MALCOLM ROAD SUITE 102<br><hr/> City CLINTON State MD Zip Code 20735<br><hr/> Purpose of Disbursement<br>ck 5183<br>Candidate Name<br>HOYER FOR CONGRESS 2010<br><hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: MD District: 05<br><hr/> Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB23.101168<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 8 / 0 3 / 2 0 1 0  |
|  | Amount of Each Disbursement this Period<br>2500.00   |
|  | Category/<br>Type  |
|  | Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>JOHN HALL FOR CONGRESS 2010<br><hr/> Mailing Address PO Box 469<br><hr/> City Beacon State NY Zip Code 12508<br><hr/> Purpose of Disbursement<br>CK 5182<br>Candidate Name<br>JOHN HALL FOR CONGRESS 2010<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><hr/> Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                            | Transaction ID: SB23.101167<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 8 / 0 3 / 2 0 1 0  |
|  | Amount of Each Disbursement this Period<br>1000.00   |
|  | Category/<br>Type  |
|  | Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>KEEP NICK RAHALL 2010<br><hr/> Mailing Address P O Box 64<br><hr/> City Beckley State WV Zip Code 25802<br><hr/> Purpose of Disbursement<br>CK 5186<br>Candidate Name<br>KEEP NICK RAHALL 2010<br><hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: WV District: 03<br><hr/> Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                      | Transaction ID: SB23.101171<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 8 / 0 3 / 2 0 1 0  |
|  | Amount of Each Disbursement this Period<br>1000.00   |
|  | Category/<br>Type  |
|  | Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

|  |  |
|--|--|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>LARSEN, RICHARD RAY 2010<br><hr/> Mailing Address P.O. BOX 326<br><hr/> City EVERETT State WA Zip Code 98206<br><hr/> Purpose of Disbursement<br>CK 5184<br>Candidate Name<br>LARSEN, RICHARD RAY 2010<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: WA District: 02<br>Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                | Transaction ID: SB23.101190<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 8 / 0 3 / 2 0 1 0  |
|  | Amount of Each Disbursement this Period<br>1000.00   |
|  | Category/<br>Type  |
|  | Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>MCCOLLUM FOR CONGRESS 2010<br><hr/> Mailing Address P.O. Box 14131<br><hr/> City St. Paul State MN Zip Code 55114<br><hr/> Purpose of Disbursement<br>CK 5194<br>Candidate Name<br>MCCOLLUM FOR CONGRESS 2010<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: MN District: 04<br>Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼         | Transaction ID: SB23.101179<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 9 / 2 4 / 2 0 1 0  |
|  | Amount of Each Disbursement this Period<br>1000.00   |
|  | Category/<br>Type  |
|  | Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>RICHARDSON FOR CONGRESS 2010<br><hr/> Mailing Address 1212 S VICTORY BLVD<br><hr/> City BURBANK State CA Zip Code 91502<br><hr/> Purpose of Disbursement<br>CK 5187<br>Candidate Name<br>RICHARDSON FOR CONGRESS 2010<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: CA District: 37<br>Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB23.101172<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 8 / 0 3 / 2 0 1 0  |
|  | Amount of Each Disbursement this Period<br>1000.00   |
|  | Category/<br>Type  |
|  | Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

3000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

|   |   |
|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>ROS-LEHTINEN FOR CONGRESS 2010</p> <p>Mailing Address P O Box 52-2784</p> <p>City MIAMI State FL Zip Code 33152</p> <p>Purpose of Disbursement CK 5192</p> <p>Candidate Name ROS-LEHTINEN FOR CONGRESS 2010</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: FL District: 18</p> | <p><b>Transaction ID:</b> SB23.101177</p> <p>Date of Disbursement<br/>09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period<br/>1000.00</p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>ROS-LEHTINEN FOR CONGRESS 2010</p> <p>Mailing Address P O Box 52-2784</p> <p>City MIAMI State FL Zip Code 33152</p> <p>Purpose of Disbursement CK 5196</p> <p>Candidate Name ROS-LEHTINEN FOR CONGRESS 2010</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: FL District: 18</p> | <p><b>Transaction ID:</b> SB23.101182</p> <p>Date of Disbursement<br/>09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period<br/>1500.00</p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>ROYBAL-ALLARD, LUCILLE 2010</p> <p>Mailing Address PO Box 582</p> <p>City Kensington State MD Zip Code 20895</p> <p>Purpose of Disbursement CK 5195</p> <p>Candidate Name ROYBAL-ALLARD, LUCILLE 2010</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CA District: 34</p>       | <p><b>Transaction ID:</b> SB23.101180</p> <p>Date of Disbursement<br/>09 / 24 / 2010</p> <p>Amount of Each Disbursement this Period<br/>1000.00</p> |

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

3500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

**A.** Full Name (Last, First, Middle Initial)  
TIM BISHOP FOR CONGRESS 2010

Mailing Address PO Box 437

City Farmingville State NY Zip Code 11738

Purpose of Disbursement  
CK 5188

Candidate Name  
TIM BISHOP FOR CONGRESS 2010

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 01

Transaction ID: SB23.101173  
Date of Disbursement

/  /

Amount of Each Disbursement this Period

Category/  
Type

**B.** Full Name (Last, First, Middle Initial)  
TIM BISHOP FOR CONGRESS 2010

Mailing Address PO Box 437

City Farmingville State NY Zip Code 11738

Purpose of Disbursement  
CK 5193

Candidate Name  
TIM BISHOP FOR CONGRESS 2010

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 01

Transaction ID: SB23.101178  
Date of Disbursement

/  /

Amount of Each Disbursement this Period

Category/  
Type

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

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