# REPORT OF RECEIPTS AND DISBURSEMENTS

**For Other Than An Authorized Committee**

**(Summary Page)**

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 FEB -1 P 1:05

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In full)
ROBERT P. MORGAN, TREASURER
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street) [ ] Check if different than previously reported
14600 TRINITY BLVD, SUITE 500

CITY, STATE and ZIP CODE
FORT WORTH, TX. 76155-2512

2. FEC IDENTIFICATION NUMBER
C-00267849

3. [XX] 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
[XX] January 31 Year End Report
[ ] July 31 Mid Year Report (Non-election Year Only
[ ] Termination Report

(b) Is this Report an Amendment? [ ] YES [ ] NO

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 |

[ ] 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____

[ ] 30-Day Post-Election Report following the General Election on _____ in the State of _____

| SUMMARY | COLUMN A This Period | COLUMN B This Period |
|---|---|---|
| 5. Covering Period 01-Jul-99 Through 31-Dec-99 | | |
| 6. (a) Cash on Hand January 1, 1999 | | $ 111,402.00 |
| (b) Cash on Hand at Beginning of Reporting Period | $ 113,882.00 | |
| (c) Total Receipts (from Line 19) | $ 55,620.00 | $ 108,501.00 |
| (d) Subtotal (add Lines 6(b) and 6C for Column A and Lines 6(a) and 6C for Column B) | $ 169,502.00 | $ 219,903.00 |
| 7. Total Disbursements (from Line 30) | $ 975.00 | $ 51,376.00 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 form Line 6(d) | $ 168,527.00 | $ 168,527.00 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | $ 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | $ 0.00 | |

For further information contact:
Federal Election Commission
999 E. Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

*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
ROBERT P. MORGAN, TREASURER

Signature of Treasurer

Date 1-27-00

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)

FE7AR047
FECform3X.DEC99.XLS

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

(revised 1/1/91)

| NAME OF COMMITTEE<br>ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE | REPORT COVERING PERIOD<br>FROM | TO | |
|---|---|---|---|
| | COLUMN A<br>TOTAL THIS PERIOD | COLUMN B<br>CALENDAR YEAR | |
| **I. Receipts** | | | |
| 11. Contributions (other than loans) From: | | | |
| a. Individual/Persons Other Than Political Committees | | | |
| i. Itemized (use Schedule A) | 7,105 | 8,365 | 11(a)(i) |
| ii. Unitemized | 46,192 | 95,722 | 11(a)(ii) |
| iii. Total (add i and ii) > | 53,297 | 104,087 | 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) > | 53,297 | 104,087 | 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.) | 2,323 | 4,414 | 17 |
| 18. Transfers from Nonfederal Account for Joint Activity | | | 18 |
| 19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) > | 55,620 | 108,501 | 19 |
| 20. Total Federal Receipts (subtract line 18 from line 19) > | 55,620 | 108,501 | 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 | 500 | 45,000 | 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) > | | | 28(d) |
| 29. Other Disbursements | 475 | 5,476 | 29 |
| 30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) > | 975 | 51,376 | 30 |
| 31. Total Federal Disbursements (subtract line 21 a ii from line 30) > | 975 | 51,376 | 31 |
| **III. Net Contributions/Operating Expenditures** | | | |
| 32. Total Contributions (other than loans)(from line 11d) | 53,297 | 104,087 | 32 |
| 33. Total Contribution Refunds (from line 28d) | 0 | 0 | 33 |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | 53,297 | 104,087 | 34 |
| 35. Total Federal Operating Expenditures (add 21 a i and 21b) > | 0 | 0 | 35 |
| 36. Offsets to Operating Expenditures (from line 15) | 0 | 0 | 36 |
| 37. Net Operating Expenditures (subtract line 36 from 35) > | 0 | 0 | 37 |

**SCHEDULE A** **ITEMIZED RECEIPTS**

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

PAGE 1 OF 7

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. Alderson, Stephen<br>PO Box 401<br>Edwardsville, IL 62056-0401 Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Airline Pilot<br>Aggregate Year-to-Date $ 300.00 | Payroll Deduction | 150.00<br>( 25 per month) |
| B. Aldrich, David<br>221 Chasse Cir<br>St Charles, IL 60174-5723 Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Airline Pilot<br>Aggregate Year-to-Date $ 240.00 | Payroll Deduction | 120.00<br>( 20 per month) |
| C. Arndt, Richard<br>PO Box 333<br>Clinton, CT 06413-0333 Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Airline Pilot<br>Aggregate Year-to-Date $ 300.00 | Payroll Deduction | 150.00<br>( 25 per month) |
| D. Bowen, Michael<br>341 N Homestead Dr<br>Coatesville, PA 19320-1377 Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Airline Pilot<br>Aggregate Year-to-Date $ 600.00 | Payroll Deduction | 300.00<br>( 50 per month) |
| E. Clayton, Philip<br>1415 S Barton St # 260<br>Arlington, VA 22204-4842 Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Airline Pilot<br>Aggregate Year-to-Date $ 240.00 | Payroll Deduction | 120.00<br>( 20 per month) |
| F. Considine, Martin<br>1295 Wood Row Way<br>Wellington, FL 33414-9029 Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Airline Pilot<br>Aggregate Year-to-Date $ 300.00 | Payroll Deduction | 150.00<br>( 25 per month) |
| G. Cook, Joseph<br>423 Pomona Ave<br>Coronado, CA 92118-1905 Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Airline Pilot<br>Aggregate Year-to-Date $ 200.00 | Payroll Deduction | 150.00<br>( 25 per month) |

**SUBTOTAL** of Receipts This Page (optional) ..... 1,140.00

**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

PAGE 2 OF 2

FOR LINE NUMBER 11(a)(c)

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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 / Aggregate Year-to-Date | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| A. Drummond, David<br>1 Crane Ct<br>Manalapan, NJ 07726-3626<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Airline Pilot<br>Aggregate Year-to-Date > $ 450.00 | Payroll Deduction | 450.00<br>( 75 per month) |
| B. Edwards, Joel<br>W303N1760 Maple Ave<br>Pewaukee, WI 53072-4753<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Airline Pilot<br>Aggregate Year-to-Date > $ 900.00 | Payroll Deduction | 150.00<br>( 25 per month) |
| C. Ehrlich, John<br>140 Chestnut Dr<br>Wayne, NJ 07470-5602<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Airline Pilot<br>Aggregate Year-to-Date > $ 300.00 | Payroll Deduction | 150.00<br>( 25 per month) |
| D. Estes, Richard<br>545 Clew Ct<br>Azle, TX 76020-4941<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Airline Pilot<br>Aggregate Year-to-Date > $ 300.00 | Payroll Deduction | 120.00<br>( 20 per month) |
| E. Freudenthal, Roy<br>5821 W Orlando Cir<br>Broken Arrow, OK 74011-1159<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Airline Pilot<br>Aggregate Year-to-Date > $ 240.00 | Payroll Deduction | 180.00<br>( 15 per month) |
| F. Gore, William<br>938 E Wimbledon Dr<br>Fresno, CA 93720-1356<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Airline Pilot<br>Aggregate Year-to-Date > $ 360.00 | Payroll Deduction | 120.00<br>( 20 per month) |
| G. Gray, William<br>PO Box 2234<br>Somerset, NJ 08875-2234<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Airline Pilot<br>Aggregate Year-to-Date > $ 240.00 | Payroll Deduction | 125.00<br>( 25 per month) |

**SUBTOTAL** of Receipts This Page (optional) ..... 275.00 > 1,295.00

**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

PAGE 1 OF 1

FOR LINE NUMBER 11 (a)(b)

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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. Hahn, Michael<br>1880 Jackson St<br>Oshkosh, WI 54901-2204<br>Receipt For: Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Occupation: Airline Pilot<br>Aggregate Year-to-Date > $ 300.00 | Payroll Deduction | 300.00<br>( 50 per month) |
| B. Hughes, Joseph<br>510 Gardenia<br>Delray Beach, FL 33444<br>Receipt For: Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Occupation: Airline Pilot<br>Aggregate Year-to-Date > $ 600.00 | Payroll Deduction | 120.00<br>( 20 per month) |
| C. Huguley Jr, Robert<br>302 Whitehorse Ct SW<br>Leesburg, VA 20175-2504<br>Receipt For: Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Occupation: Airline Pilot<br>Aggregate Year-to-Date > $ 240.00 | Payroll Deduction | 150.00<br>( 25 per month) |
| D. Igelsrud, Jon<br>330 The Vlg Unit 308<br>Redondo Beach, CA 90277-2622<br>Receipt For: Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Occupation: Airline Pilot<br>Aggregate Year-to-Date > $ 300.00 | Payroll Deduction | 150.00<br>( 25 per month) |
| E. Johnson, Craig<br>4245 Colony Ter<br>Encinitas, CA 92024-4907<br>Receipt For: Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Occupation: Airline Pilot<br>Aggregate Year-to-Date > $ 300.00 | Payroll Deduction | 120.00<br>( 20 per month) |
| F. Jones, Donald<br>4800 Silent Ridge Ct E<br>Fort Worth, TX 76132-2805<br>Receipt For: Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Occupation: Airline Pilot<br>Aggregate Year-to-Date > $ 240.00 | Payroll Deduction | 180.00<br>( 30 per month) |
| G. Jones, Norm<br>13410 Preston Rd # 1-365<br>Dallas, TX 75240-5210<br>Receipt For: Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Occupation: Airline Pilot<br>Aggregate Year-to-Date > $ 360.00 | Payroll Deduction | 150.00<br>( 25 per month) |

**SUBTOTAL** of Receipts This Page (optional) ..... > 1,170.00

**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 | PAGE OF |
|---|---|
| | FOR LINE NUMBER 11 (a)(i) |

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**NAME OF COMMITTEE (in Full)**

Allied Pilots Association 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<br>Markl, Eric<br>403 Rockwood Rd<br>Wilmington, DE 19802-1237<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer: American Airlines, Inc.<br>Occupation: Airline Pilot<br>Aggregate Year-to-Date: $ | Payroll Deduction | 180.00<br>( 30 per month) |
| B. Full Name, Mailing Address and ZIP Code<br>McClelland, Douglas<br>968 Heathergreen Ct<br>Concord, CA 94521-5404<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer: American Airlines, Inc.<br>Occupation: Airline Pilot<br>Aggregate Year-to-Date: $ 210.00 | Payroll Deduction | 150.00<br>( 25 per month) |
| C. Full Name, Mailing Address and ZIP Code<br>McCollam, Michael<br>8824 S 71st East Ave<br>Tulsa, OK 74133-4118<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer: American Airlines, Inc.<br>Occupation: Airline Pilot<br>Aggregate Year-to-Date: $ 300.00 | Payroll Deduction | 120.00<br>( 10 per month) |
| D. Full Name, Mailing Address and ZIP Code<br>Michaelsen, Kent<br>38 Sawyer Rd<br>Hampstead, NH 03841-2130<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer: American Airlines, Inc.<br>Occupation: Airline Pilot<br>Aggregate Year-to-Date: $ 240.00 | Payroll Deduction | 120.00<br>( 20 per month) |
| E. Full Name, Mailing Address and ZIP Code<br>Morgan, Gerald<br>4716 Esplanade Ct<br>Granbury, TX 76049-4016<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer: American Airlines, Inc.<br>Occupation: Airline Pilot<br>Aggregate Year-to-Date: $ 240.00 | Payroll Deduction | 120.00<br>( 20 per month) |
| F. Full Name, Mailing Address and ZIP Code<br>Ostronik, KC<br>101425 Overseas Hwy #822<br>Key Largo, FL 33037-4505<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer: American Airlines, Inc.<br>Occupation: Airline Pilot<br>Aggregate Year-to-Date: $ 240.00 | Payroll Deduction | 120.00<br>( 20 per month) |
| G. Full Name, Mailing Address and ZIP Code<br>Patten, Edward<br>10025 Altamont Cir<br>Fredericksburg, VA 22408-8865<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer: American Airlines, Inc.<br>Occupation: Airline Pilot<br>Aggregate Year-to-Date: $ 240.00 | Payroll Deduction | 120.00<br>( 20 per month) |

| | |
|---|---|
| **SUBTOTAL** of Receipts This Page (optional) ..... 240.00 | 930.00 |
| **TOTAL** This Period (last page this line number only) ..... | |

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**SCHEDULE A** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

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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 / Aggregate Year-to-Date | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| Perry, James<br>12166 NW 9th Pl<br>Coral Springs, FL 33071-5011 | American Airlines, Inc.<br>Airline Pilot<br>$ 420.00 | Payroll Deduction | 210.00<br>( 35 per month) |
| Receipt For: ☐ Primary ☐ General ☐ Other (specify): | | | |
| **B. Full Name, Mailing Address and ZIP Code** | **Name of Employer / Occupation / Aggregate Year-to-Date** | **Date (month, day, year)** | **Amount of Each Receipt this Period** |
| Reed, Mark<br>2925 Coral Shores Dr<br>Fort Lauderdale, FL 33306-1257 | American Airlines, Inc.<br>Airline Pilot<br>$ 240.00 | Payroll Deduction | 120.00<br>( 20 per month) |
| Receipt For: ☐ Primary ☐ General ☐ Other (specify): | | | |
| **C. Full Name, Mailing Address and ZIP Code** | **Name of Employer / Occupation / Aggregate Year-to-Date** | **Date (month, day, year)** | **Amount of Each Receipt this Period** |
| Roach, Steve<br>33 Prairie Falcon Dr<br>Novato, CA 94949-6636 | American Airlines, Inc.<br>Airline Pilot<br>$ 300.00 | Payroll Deduction | 150.00<br>( 25 per month) |
| Receipt For: ☐ Primary ☐ General ☐ Other (specify): | | | |
| **D. Full Name, Mailing Address and ZIP Code** | **Name of Employer / Occupation / Aggregate Year-to-Date** | **Date (month, day, year)** | **Amount of Each Receipt this Period** |
| Roberts, Robert<br>5004 Heather Road<br>Midland, TX 79705 | American Airlines, Inc.<br>Airline Pilot<br>$ 240.00 | Payroll Deduction | 120.00<br>( 20 per month) |
| Receipt For: ☐ Primary ☐ General ☐ Other (specify): | | | |
| **E. Full Name, Mailing Address and ZIP Code** | **Name of Employer / Occupation / Aggregate Year-to-Date** | **Date (month, day, year)** | **Amount of Each Receipt this Period** |
| Schlegel, Duane<br>211 N Oakland St<br>Arlington, VA 22203-3512 | American Airlines, Inc.<br>Airline Pilot<br>$ 240.00 | Payroll Deduction | 120.00<br>( 20 per month) |
| Receipt For: ☐ Primary ☐ General ☐ Other (specify): | | | |
| **F. Full Name, Mailing Address and ZIP Code** | **Name of Employer / Occupation / Aggregate Year-to-Date** | **Date (month, day, year)** | **Amount of Each Receipt this Period** |
| Siciliano, Daniel<br>2861 NW Timbercreek Cir<br>Boca Raton, FL 33431-4041 | American Airlines, Inc.<br>Airline Pilot<br>$ 240.00 | Payroll Deduction | 120.00<br>( 20 per month) |
| Receipt For: ☐ Primary ☐ General ☐ Other (specify): | | | |
| **G. Full Name, Mailing Address and ZIP Code** | **Name of Employer / Occupation / Aggregate Year-to-Date** | **Date (month, day, year)** | **Amount of Each Receipt this Period** |
| Snelling, Thomas<br>177 Ocean Lane Dr<br>#302<br>Key Biscayne, FL 33149-1129 | American Airlines, Inc.<br>Airline Pilot<br>$ 240.00 | Payroll Deduction | 120.00<br>( 20 per month) |
| Receipt For: ☐ Primary ☐ General ☐ Other (specify): | | | |

**SUBTOTAL** of Receipts This Page (optional) ..... 960.00

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

FEaAN-01

**SCHEDULE A** **ITEMIZED RECEIPTS**

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

PAGE OF

FOR LINE NUMBER 11(a)(i)

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Allied Pilots Association Political Action Committee

| Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation / Aggregate Year-to-Date | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| A. Spencer, Morris<br>4599 Mount Gilead Church Rd<br>Sophia, NC 27350-8835 | American Airlines, Inc.<br>Airline Pilot | Payroll Deduction | 120.00<br>( 20 per month) |
| B. Stoner, Marvin<br>6205 Waterview Dr<br>Arlington, TX 76016-2049 | American Airlines, Inc.<br>Airline Pilot<br>240.00 | Payroll Deduction | 150.00<br>( 25 per month) |
| C. Tarpenning, Cory<br>31224 Eona Cir<br>Temecula, CA 92592-5701 | American Airlines, Inc.<br>Airline Pilot<br>300.00 | Payroll Deduction | 150.00<br>( 25 per month) |
| D. Thielbar, Herbert<br>9 Segura<br>Irvine, CA 92612-1723 | American Airlines, Inc.<br>Airline Pilot<br>300.00 | Payroll Deduction | 120.00<br>( 20 per month) |
| E. Thomas, John W.<br>179 Harbourside Cir<br>Jupiter, FL 33477-9349 | American Airlines, Inc.<br>Airline Pilot<br>240.00 | Payroll Deduction | 120.00<br>( 20 per month) |
| F. Tobin, Richard<br>181 E 12th St<br>Arcata, CA 95521-6050 | American Airlines, Inc.<br>Airline Pilot<br>240.00 | Payroll Deduction | 120.00<br>( 20 per month) |
| G. Trescott, Todd<br>1866 Heritage Way<br>Yountville, CA 94599-9404 | American Airlines, Inc.<br>Airline Pilot<br>240.00 | Payroll Deduction | 240.00<br>( 40 per month) |

Receipt For: Primary / General / Other (specify):

| | |
|---|---|
| **SUBTOTAL** of Receipts This Page (optional) ..... 240.00 | 1,020.00 |
| **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

PAGE 7 OF 7

FOR LINE NUMBER 11(a)(i)

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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 / Aggregate Year-to-Date | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| Trommer, Scott<br>550 Edinburgh Cir<br>Danville, CA 94526-2903<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Airline Pilot<br>300.00 | Payroll Deduction | 150.00<br>( 25 per month) |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation / Aggregate Year-to-Date | Date (month, day, year) | Amount of Each Receipt this Period |
| Watkins, Jeffrey<br>27470 W Cuba Rd<br>Barrington, IL 60010-2770<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Airline Pilot<br>300.00 | Payroll Deduction | 150.00<br>( 25 per month) |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation / Aggregate Year-to-Date | Date (month, day, year) | Amount of Each Receipt this Period |
| Weller, Gary<br>1687 Nickerson Way<br>Arnold, MD 21012-2567<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Airline Pilot<br>300.00 | Payroll Deduction | 150.00<br>( 25 per month) |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation / Aggregate Year-to-Date | Date (month, day, year) | Amount of Each Receipt this Period |
| Weyer, Wayne<br>2400 SH 121 Apt 2105<br>Euless, TX 76039<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | American Airlines, Inc.<br>Airline Pilot<br>300.00 | Payroll Deduction | 140.00<br>( 17 per month) |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation / Aggregate Year-to-Date | Date (month, day, year) | Amount of Each Receipt this Period |
| Receipt For: ☐ Primary ☐ General ☐ Other (specify): | 200.00 | | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation / Aggregate Year-to-Date | Date (month, day, year) | Amount of Each Receipt this Period |
| Receipt For: ☐ Primary ☐ General ☐ Other (specify): | | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation / Aggregate Year-to-Date | Date (month, day, year) | Amount of Each Receipt this Period |
| Receipt For: ☐ Primary ☐ General ☐ Other (specify): | | | |

| | |
|---|---|
| **SUBTOTAL** of Receipts This Page (optional) | 590.00 |
| **TOTAL** This Period (last page this line number only) | $7,105.00 |

FE4NN101

**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 copies 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<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|---|---|
| B.Full Name,Mailing Address and ZIP Code<br>**DAN CURRAN CAMPAIGN**<br>PO BOX 3098<br>CLEARWATER, FL 33767 **CK # 646**<br>STATE REP-FLORIDA | Purpose of Disbursement<br>**CONTRIBUTION**<br>Disbursement for: ☒ Primary ☐ General ☐ Other (specify) | Date (month, day, year)<br>**12/06/1999** | Amount of Each Disbursement This Period<br>**500** |
| C.Full Name,Mailing Address and ZIP Code<br>**CK #** | Purpose of Disbursement<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| D.Full Name,Mailing Address and ZIP Code<br>**CK #** | Purpose of Disbursement<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| E.Full Name,Mailing Address and ZIP Code<br>**CK #** | Purpose of Disbursement<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| F.Full Name,Mailing Address and ZIP Code<br>**CK #** | Purpose of Disbursement<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| G.Full Name,Mailing Address and ZIP Code<br>**CK #** | Purpose of Disbursement<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| H.Full Name,Mailing Address and ZIP Code<br>**CK #** | Purpose of Disbursement<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| I.Full Name,Mailing Address and ZIP Code<br>**CK #** | Purpose of Disbursement<br>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) ..... > | **$500.00** |

SCHEDB DEC99 XLS

FEB9.N121

SCHEDULE B ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 29

Any information copies 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 |
|---|---|---|---|
| Internal Revenue Service<br>Dept of the Treasury CK # 645 | IRS TAX PAYMENT<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | 09/28/1999 | 475 |
| B.Full Name,Mailing Address and ZIP Code<br>CK # | Purpose of Disbursement<br>Disbursement for: ☒ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| C.Full Name,Mailing Address and ZIP Code<br>CK # | Purpose of Disbursement<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| D.Full Name,Mailing Address and ZIP Code<br>CK # | Purpose of Disbursement<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| E.Full Name,Mailing Address and ZIP Code<br>CK # | Purpose of Disbursement<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| F.Full Name,Mailing Address and ZIP Code<br>CK # | Purpose of Disbursement<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| G.Full Name,Mailing Address and ZIP Code<br>CK # | Purpose of Disbursement<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| H.Full Name,Mailing Address and ZIP Code<br>CK # | Purpose of Disbursement<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| I.Full Name,Mailing Address and ZIP Code<br>CK # | Purpose of Disbursement<br>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) ..... > | 475.00 |

SCHEDB DEC99.XLS

FESAN121

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 1/28/00 |
| ☐ | 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 |
| ☐ | Electronic Filing | |

RB — PREPARER

2/1/00 — DATE PREPARED

(4/98)