

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Altria Group, Inc. Political Action Committee (AltriaPAC)**

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

**A. Russo, Alex, T, ,**

Mailing Address 419 Belden Hill Rd

City  
Wilton

State  
CT

Zip Code  
06897-3828

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Philip Morris Capital Corporation

Occupation (for Individual)

VP Asset & Portfolio Managemen

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 10 / 2019

**Transaction ID : 201905087214-4**

Amount of Each Receipt this Period

76.96

☐ Memo Item

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

**B. Russo, Alex, T, ,**

Mailing Address 419 Belden Hill Rd

City  
Wilton

State  
CT

Zip Code  
06897-3828

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Philip Morris Capital Corporation

Occupation (for Individual)

VP Asset & Portfolio Managemen

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 23 / 2019

**Transaction ID : 201905217136-4**

Amount of Each Receipt this Period

76.96

☐ Memo Item

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

**C. Salamone, Julius, E, , Jr**

Mailing Address 505 Porter St  
Apt 1003

City  
Richmond

State  
VA

Zip Code  
23224-2368

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Altria Client Services LLC

Occupation (for Individual)

Mgr Retail DMS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 10 / 2019

**Transaction ID : 201905087214-37**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

178.92