

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
JetBlue Airways Corporation Crewmember Good Government Fund

ADDRESS (number and street) **27-01 Queens Plaza North**
Check if different than previously reported. (ACC) **Long Island City** **NY** **11101**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C **C00484584** 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 Year-End 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 / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Dover, Joshua, , ,
Type or Print Name of Treasurer

Signature of Treasurer Dover, Joshua, , , [Electronically Filed] Date / /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

JetBlue Airways Corporation Crewmember Good Government Fund

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2020"/> | | 49947.64 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 53704.92 | |
| (c) Total Receipts (from Line 19) | 4428.64 | 13185.92 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 58133.56 | 63133.56 |
| 7. Total Disbursements (from Line 31)..... | 1000.00 | 6000.00 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 57133.56 | 57133.56 |
| 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 | |

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

JetBlue Airways Corporation Crewmember Good Government Fund

Report Covering the Period: From: M M / D D / Y Y Y Y 03 / 01 / 2020 To: M M / D D / Y Y Y Y 03 / 31 / 2020

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 3618.64 | 8105.92 |
| (ii) Unitemized | 810.00 | 5080.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 4428.64 | 13185.92 |
| (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) | 4428.64 | 13185.92 |
| 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.)..... | 0.00 | 0.00 |
| 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 Transfers (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)).....▶ | 4428.64 | 13185.92 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 4428.64 | 13185.92 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated 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 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 0.00 | 0.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 1000.00 | 6000.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 | 0.00 |
| (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 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0.00 | 0.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated 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)) .. | 1000.00 | 6000.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 1000.00 | 6000.00 |

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 4428.64 | 13185.92 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 4428.64 | 13185.92 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00 | 0.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 0.00 |

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

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

FOR LINE NUMBER: PAGE 6 OF 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
JetBlue Airways Corporation Crewmember Good Government Fund

A. ALLEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27-01 QUEENS PLAZA NORTH
 City LONG ISLAND CITY State NY Zip Code 11101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JETBLUE AIRWAYS CORPORATION Occupation (for Individual) VP SAFETY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2020
Transaction ID : SA11AI.6061
 Amount of Each Receipt this Period 100.00
 Memo Item
 \$50 Contribution Biweekly

B. Barry, Andres, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1855 Griffin Road Suite A-220
 City Dania Beach State FL Zip Code 33004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JetBlue Airways Corporation Occupation (for Individual) Pres., JetBlue Travel Products
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1249.98

Date of Receipt 03 / 31 / 2020
Transaction ID : SA11AI.6078
 Amount of Each Receipt this Period 416.66
 Memo Item
 \$208.33 Contribution Biweekly

C. BATTAGLIA, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27-01 QUEENS PLAZA NORTH
 City LONG ISLAND CITY State NY Zip Code 11101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JETBLUE AIRWAYS CORPORATION Occupation (for Individual) SVP SYSTEM OPERATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2020
Transaction ID : SA11AI.6097
 Amount of Each Receipt this Period 100.00
 Memo Item
 \$50 Contribution Biweekly

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 616.66 |
| 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 OF 13 |
| <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)
JetBlue Airways Corporation Crewmember Good Government Fund

A. CARBONE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27-01 QUEENS PLAZA NORTH
 City LONG ISLAND CITY State NY Zip Code 11101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JETBLUE AIRWAYS CORPORATION Occupation (for Individual) VP ASSOCIATE GENERAL COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2020
Transaction ID : SA11AI.6080
 Amount of Each Receipt this Period 100.00
 Memo Item
 \$50 Contribution Biweekly

B. CHRISTIE, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8265 HANGAR BLVD
 City ORLANDO State FL Zip Code 32827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JETBLUE AIRWAYS CORPORATION Occupation (for Individual) SVP SAFETY SECURITY & AIR OPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 31 / 2020
Transaction ID : SA11AI.6064
 Amount of Each Receipt this Period 200.00
 Memo Item
 \$100 Contribution Biweekly

C. Deason, Ian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27-01 Queens Plaza North
 City Long Island City State NY Zip Code 11101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JetBlue Airways Corporation Occupation (for Individual) SVP Customer Experience
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 31 / 2020
Transaction ID : SA11AI.6066
 Amount of Each Receipt this Period 200.00
 Memo Item
 \$100 Contribution Biweekly

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 500.00 |
| 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 8 OF 13 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
JetBlue Airways Corporation Crewmember Good Government Fund

A. ELLIOTT, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27-01 QUEENS PLAZA NORTH
 City LONG ISLAND CITY State NY Zip Code 11101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JETBLUE AIRWAYS CORPORATION Occupation (for Individual) EVP PEOPLE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1249.98

Date of Receipt 03 / 31 / 2020
Transaction ID : SA11AI.6079
 Amount of Each Receipt this Period 416.66
 Memo Item
 \$208.33 Contribution Biweekly

B. FORTE, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8265 HANGAR BLVD
 City ORLANDO State FL Zip Code 32827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JETBLUE AIRWAYS CORPORATION Occupation (for Individual) VP JETBLUE UNIVERSITY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2020
Transaction ID : SA11AI.6069
 Amount of Each Receipt this Period 100.00
 Memo Item
 \$50 Contribution Biweekly

C. GERAGHTY, JOANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27-01 QUEENS PLAZA NORTH
 City LONG ISLAND CITY State NY Zip Code 11101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JETBLUE AIRWAYS CORPORATION Occupation (for Individual) President & COO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1249.98

Date of Receipt 03 / 31 / 2020
Transaction ID : SA11AI.6070
 Amount of Each Receipt this Period 416.66
 Memo Item
 \$208.33 Contribution Biweekly

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 933.32 |
| 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 9 OF 13 |
| <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)
JetBlue Airways Corporation Crewmember Good Government Fund

A. GOODELL, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1212 NEW YORK AVENUE NW
 City WASHINGTON State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JETBLUE AIRWAYS CORPORATION Occupation (for Individual) VP GOVERNMENT & AIRPORT AFFAI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **03 / 31 / 2020**
Transaction ID : SA11AI.6082
 Amount of Each Receipt this Period 150.00
 Memo Item
 \$75 Contribution Biweekly

B. HNAT, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27-01 QUEENS PLAZA NORTH
 City LONG ISLAND CITY State NY Zip Code 11101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JETBLUE AIRWAYS CORPORATION Occupation (for Individual) SENIOR ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1249.98

Date of Receipt **03 / 31 / 2020**
Transaction ID : SA11AI.6068
 Amount of Each Receipt this Period 416.66
 Memo Item
 \$208.33 Contribution Biweekly

C. LAND, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1212 NEW YORK AVENUE NW SUITE 1212
 City WASHINGTON State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JETBLUE AIRWAYS CORPORATION Occupation (for Individual) SVP GOVT AFFAIRS & ASSOC GENE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 606.00

Date of Receipt **03 / 31 / 2020**
Transaction ID : SA11AI.6063
 Amount of Each Receipt this Period 202.00
 Memo Item
 \$101 Contribution Biweekly

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 768.66 |
| 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 10 OF 13 |
| | <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 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
JetBlue Airways Corporation Crewmember Good Government Fund

A. LITTLEFORD, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6322 SOUTH 3000 EAST
 SUITE G10
 City SALT LAKE CITY State UT Zip Code 84121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JETBLUE AIRWAYS CORPORATION Occupation (for Individual) VP CUSTOMER SUPPORT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2020
Transaction ID : SA11AI.6090
 Amount of Each Receipt this Period 100.00
 Memo Item
 \$50 Contribution Biweekly

B. MCCARTHY, RACHEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27-01 QUEENS PLAZA NORTH
 City LONG ISLAND CITY State NY Zip Code 11101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JETBLUE AIRWAYS CORPORATION Occupation (for Individual) SVP TALENT AND LEARNING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2020
Transaction ID : SA11AI.6062
 Amount of Each Receipt this Period 100.00
 Memo Item
 \$50 Contribution Biweekly

C. NELSON, BRANDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27-01 QUEENS PLAZA NORTH
 City LONG ISLAND CITY State NY Zip Code 11101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JETBLUE AIRWAYS CORPORATION Occupation (for Individual) General Counsel & Corporate Secretary
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 31 / 2020
Transaction ID : SA11AI.6071
 Amount of Each Receipt this Period 200.00
 Memo Item
 \$100 Contribution Biweekly

SUBTOTAL of Receipts This Page (optional).....▶ 400.00
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 11 OF 13 |
| <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)
JetBlue Airways Corporation Crewmember Good Government Fund

A. RAMASWAMY, RAMAKRISHNAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27-01 QUEENS PLAZA NORTH
 City LONG ISLAND CITY State NY Zip Code 11101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JETBLUE AIRWAYS CORPORATION Occupation (for Individual) VP IT TECHNOLOGY & INTEGRATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2020
Transaction ID : SA11AI.6092
 Amount of Each Receipt this Period 100.00
 Memo Item
 \$50 Contribution Biweekly

B. SIMI, BONNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 425 BROADWAY ST
 City REDWOOD CITY State CA Zip Code 94063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JETBLUE AIRWAYS CORPORATION Occupation (for Individual) President-Tech Ventures
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2020
Transaction ID : SA11AI.6074
 Amount of Each Receipt this Period 100.00
 Memo Item
 \$50 Contributrion Biweekly

C. STROMER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27-01 QUEENS PLAZA NORTH
 City LONG ISLAND CITY State NY Zip Code 11101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JETBLUE AIRWAYS CORPORATION Occupation (for Individual) Chief Product Officer, Technology
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2020
Transaction ID : SA11AI.6095
 Amount of Each Receipt this Period 100.00
 Memo Item
 \$50 Contribution Biweekly

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 300.00 |
| 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 12 OF 13 |
| <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)
JetBlue Airways Corporation Crewmember Good Government Fund

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sullivan, James, , ,

Mailing Address 27-01 Queens Plaza North

| | | |
|--------------------------|-------------|-------------------|
| City Long Island City | State NY | Zip Code 11101 |
|--------------------------|-------------|-------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) JetBlue Airways Corporation | Occupation (for Individual) VP Flight Operations |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | / | 31 | / | 2020 |

Transaction ID : SA11AI.6086

Amount of Each Receipt this Period
100.00

Memo Item
\$50 Contribution Biweekly

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

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

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

| | |
|-----------------------------------|-----------------------------|
| Name of Employer (for Individual) | Occupation (for Individual) |
|-----------------------------------|-----------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

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

| | |
|-----------------------------------|-----------------------------|
| Name of Employer (for Individual) | Occupation (for Individual) |
|-----------------------------------|-----------------------------|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Receipt this Period

Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 100.00 |
| TOTAL This Period (last page this line number only)..... | 3618.64 |

**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"/> 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 |

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)

JetBlue Airways Corporation Crewmember Good Government Fund

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address PO BOX 536926

City
ORLANDO

State
FL

Zip Code
32853

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

DEMINGS, VALDEZ VAL, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: FL District: 10

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | / | 09 | / | 2020 |

FEC Identification Number

Transaction ID : SB23.6099

Amount of Each Disbursement this Period

| |
|--------------------------------------|
| <input type="text" value="1000.00"/> |
|--------------------------------------|

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | / | | / | |

FEC Identification Number

Amount of Each Disbursement this Period

| |
|----------------------|
| <input type="text"/> |
|----------------------|

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | / | | / | |

FEC Identification Number

Amount of Each Disbursement this Period

| |
|----------------------|
| <input type="text"/> |
|----------------------|

Memo Item

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

| |
|--------------------------------------|
| <input type="text" value="1000.00"/> |
|--------------------------------------|

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

| |
|--------------------------------------|
| <input type="text" value="1000.00"/> |
|--------------------------------------|