

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 OF 43

(check only one)

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

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NAME OF COMMITTEE (In Full)

TRUCKING POLITICAL ACTION COMMITTEE OF THE AMERICAN TRUCKING ASSOCIATIONS INC.

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

A. COSTELLO, ROBERT, P., Mr.,

 Mailing Address 950 N Glebe Rd
 Ste 210

 City
 Arlington

 State
 VA

 Zip Code
 22203-4181

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 American Trucking Associations Inc.

 Occupation (for Individual)
 Senior Vice President & Chief Economic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : AD3AA472963564B7A891

Amount of Each Receipt this Period

☐ Memo Item

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

B. HALL, JENNIFER, L., Ms.,

 Mailing Address 950 N Glebe Rd
 Ste 210

 City
 Arlington

 State
 VA

 Zip Code
 22203-4181

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 American Trucking Associations Inc.

 Occupation (for Individual)
 General Counsel & EVP, Legal Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : A5844EB9682EE4C41AF1

Amount of Each Receipt this Period

☐ Memo Item

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

C. DUCKWORTH, JAMES, R., Mr.,

 Mailing Address 950 N Glebe Rd
 Ste 210

 City
 Arlington

 State
 VA

 Zip Code
 22203-4181

 FEC ID number of contributing
 federal political committee.

 Name of Employer (for Individual)
 American Trucking Associations Inc.

 Occupation (for Individual)
 Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : A8AE31537C6634F40ADF

Amount of Each Receipt this Period

☐ Memo Item

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

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