

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

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

FOR LINE NUMBER: PAGE 218 OF 289

(check only one)

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

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NAME OF COMMITTEE (In Full)

Amazon Corporate LLC Separate Segregated Fund (Amazon PAC)

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

A. Sullivan, Thomas, , ,

Mailing Address 440 Terry Avenue North

City
Seattle

State
WA

Zip Code
98109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Amazon.com Services, Inc.

Occupation (for Individual)
Mgr,Non-Technical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2018

Transaction ID : 2018080317214-1040

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Sullivan, William, , ,

Mailing Address 440 Terry Avenue North

City
Seattle

State
WA

Zip Code
98109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Amazon Web Services, Inc.

Occupation (for Individual)
Director,Non-Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2018

Transaction ID : 2018080317214-1262

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

C. Sutton, Nathan, , ,

Mailing Address 440 Terry Avenue North

City
Seattle

State
WA

Zip Code
98109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Amazon.com Services, Inc.

Occupation (for Individual)
Director,Non-Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2018

Transaction ID : 2018080317214-891

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

350.00

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