

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.

ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER ▼** **CITY ▲** **STATE ▲** **ZIP CODE ▲**

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.

Type or Print Name of Treasurer PAMELA TORELL, PAC TREASURER

Signature of Treasurer PAMELA TORELL, PAC TREASURER [Electronically Filed] Date / /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

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="2014"/>		400166.20
(b) Cash on Hand at Beginning of Reporting Period.....	402353.68	
(c) Total Receipts (from Line 19)	34671.59	68359.07
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	437025.27	468525.27
7. Total Disbursements (from Line 31).....	24390.00	55890.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	412635.27	412635.27
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. 06/2004)

Write or Type Committee Name

ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

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

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).....	3160.25	3850.25
(ii) Unitemized	31502.00	64490.25
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	34662.25	68340.50
(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)	34662.25	68340.50
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.).....	9.34	18.57
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))..... ▶	34671.59	68359.07
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	34671.59	68359.07

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	24000.00	55500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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	390.00	390.00
(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)).....	390.00	390.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	24390.00	55890.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24390.00	55890.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	34662.25	68340.50
34. Total Contribution Refunds (from Line 28(d))	390.00	390.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	34272.25	67950.50
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: (check only one)	PAGE 6 OF 18
	<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	

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)
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

A. /AMR DOWNLOAD *UNIDENTIFIED CONTRIBUTION

Full Name (Last, First, Middle Initial)
Mailing Address AMR PAYROLL/7645 East 63rd St

City Tulsa	State OK	Zip Code 74133
---------------	-------------	-------------------

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

Name of Employer AMERICAN AIRLINES, INC	Occupation AIRLINE PILOT
--------------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
-2.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.122417

Amount of Each Receipt this Period
-2.75

DOWNLOAD ERROR/CONTRIBUTIONS

B. Johnathan R. Benton

Full Name (Last, First, Middle Initial)
Mailing Address 1400 S Ocean Dr #1102

City Hollywood	State FL	Zip Code 33019
-------------------	-------------	-------------------

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

Name of Employer American Airlines	Occupation Airline Pilot
---------------------------------------	-----------------------------

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.121235

Amount of Each Receipt this Period
300.00

C. Robert P. Coffman

Full Name (Last, First, Middle Initial)
Mailing Address 21 Fletcher Court

City Palm Coast	State FL	Zip Code 32137
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FEC ID number of contributing federal political committee. **C**

Name of Employer American Airlines	Occupation Airline Pilot
---------------------------------------	-----------------------------

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.121357

Amount of Each Receipt this Period
158.00

SUBTOTAL of Receipts This Page (optional).....▶	455.25
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 18
	<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	

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NAME OF COMMITTEE (In Full)
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

A. Thomas J. Copeland
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Las Olas Circle
 Unit 1116
 City Fort Lauderdale State FL Zip Code 33316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Airlines Occupation Airline Pilot
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : SA11AI.121374
 Amount of Each Receipt this Period
 126.00

B. Donald C. Cruikshank
 Full Name (Last, First, Middle Initial)
 Mailing Address 7194 Baldwin Ridge Rd
 City Warrenton State VA Zip Code 20187-9180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Airlines Occupation Airline Pilot
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : SA11AI.121386
 Amount of Each Receipt this Period
 148.00

c. James S. Ditty
 Full Name (Last, First, Middle Initial)
 Mailing Address 2809 200th Ave E
 City Lake Tapps State WA Zip Code 98391-9033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Airlines Occupation Airline Pilot
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : SA11AI.121432
 Amount of Each Receipt this Period
 158.00

SUBTOTAL of Receipts This Page (optional).....▶	432.00
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 8 OF 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. David D. Durham		Date of Receipt 06 / 30 / 2014 Transaction ID : SA11Al.121451
Mailing Address 1120 Beachwood Ct		Amount of Each Receipt this Period 101.00
City Antioch	State IL	Zip Code 60002-2835
FEC ID number of contributing federal political committee. C	Name of Employer American Airlines	Occupation Airline Pilot
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.25	

Full Name (Last, First, Middle Initial) B. Edward D. Finley		Date of Receipt 06 / 30 / 2014 Transaction ID : SA11Al.121491
Mailing Address 1915 NE 214th Ter		Amount of Each Receipt this Period 105.00
City Miami	State FL	Zip Code 33179-1533
FEC ID number of contributing federal political committee. C	Name of Employer American Airlines	Occupation Airline Pilot
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. Kenneth A. Fry		Date of Receipt 06 / 30 / 2014 Transaction ID : SA11Al.121518
Mailing Address 5N853 Harvest Ct		Amount of Each Receipt this Period 158.00
City Saint Charles	State IL	Zip Code 60175-8241
FEC ID number of contributing federal political committee. C	Name of Employer American Airlines	Occupation Airline Pilot
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.50	

SUBTOTAL of Receipts This Page (optional).....▶	364.00
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 9 OF 18
	<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

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NAME OF COMMITTEE (In Full)
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

A. Takaaki Kawai
Full Name (Last, First, Middle Initial)

Mailing Address 92 Flintlock Rd

City Madison State CT Zip Code 06443-2424

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

Name of Employer American Airlines Occupation Airline Pilot

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt
06 / 30 / 2014
Transaction ID : SA11Al.121706

Amount of Each Receipt this Period
144.00

B. J. T. Keeney
Full Name (Last, First, Middle Initial)

Mailing Address 2044 WHITE POND CT

City Apex State NC Zip Code 27523-6272

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

Name of Employer American Airlines Occupation Airline Pilot

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.25

Date of Receipt
06 / 30 / 2014
Transaction ID : SA11Al.121710

Amount of Each Receipt this Period
101.00

C. Daniel W. Land Jr
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Coral Way #1214

City Miami State FL Zip Code 33145-3240

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

Name of Employer American Airlines Occupation Airline Pilot

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
06 / 30 / 2014
Transaction ID : SA11Al.121757

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 545.00

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 10 OF 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Kevin J. Mase		Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : SA11AI.121829
Mailing Address 1414 Alegriano Ave		Amount of Each Receipt this Period 150.00
City Coral Gables	State FL	Zip Code 33146-1602
FEC ID number of contributing federal political committee. C	Name of Employer American Airlines	Occupation Airline Pilot
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

Full Name (Last, First, Middle Initial) B. James E. Perry		Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : SA11AI.122021
Mailing Address 4242 NW 2 ST Apt W1204		Amount of Each Receipt this Period 390.00
City Miami	State FL	Zip Code 33126-5405
FEC ID number of contributing federal political committee. C	Name of Employer American Airlines	Occupation Airline Pilot
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

Full Name (Last, First, Middle Initial) C. Steve H. Roach		Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : SA11AI.122097
Mailing Address 3551 Rocky Ridge Way		Amount of Each Receipt this Period 158.00
City El Dorado Hills	State CA	Zip Code 95762-4429
FEC ID number of contributing federal political committee. C	Name of Employer American Airlines	Occupation Airline Pilot
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.50	

SUBTOTAL of Receipts This Page (optional).....▶	698.00
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 11 OF 18
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Brian A. Smith		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2014 Transaction ID : SA11AI.122191
Mailing Address 27151 Fordham Dr		Amount of Each Receipt this Period 108.00
City Wesley Chapel	State FL	Zip Code 33543-8734
FEC ID number of contributing federal political committee.	C	
Name of Employer American Airlines	Occupation Airline Pilot	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00	

Full Name (Last, First, Middle Initial) B. Brian E. Sullivan		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2014 Transaction ID : SA11AI.122245
Mailing Address 3227 Formby Lane		Amount of Each Receipt this Period 108.00
City Fairfield	State CA	Zip Code 94534-7803
FEC ID number of contributing federal political committee.	C	
Name of Employer American Airlines	Occupation Airline Pilot	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00	

Full Name (Last, First, Middle Initial) C. Christopher L. Thomas		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2014 Transaction ID : SA11AI.122270
Mailing Address 469 Lakehurst Ct		Amount of Each Receipt this Period 150.00
City Fairfield	State CA	Zip Code 94533-1352
FEC ID number of contributing federal political committee.	C	
Name of Employer American Airlines	Occupation Airline Pilot	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	366.00
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 12 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Alex E. True

Mailing Address 611 San Antonio Ave

City State Zip Code
Coral Gables FL 33146-1320

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

Name of Employer Occupation
American Airlines Airline Pilot

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : SA11AI.122296

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
B. Joseph R. Weis

Mailing Address 1322 NW 112th Ter

City State Zip Code
Coral Springs FL 33071-6457

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

Name of Employer Occupation
American Airlines Airline Pilot

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : SA11AI.122349

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	3160.25

**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"/> 24	<input type="checkbox"/> 25	<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

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NAME OF COMMITTEE (In Full)
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. COHEN FOR CONGRESS *		Date of Disbursement MM / DD / YYYY 06 / 12 / 2014
Mailing Address 349 Kenilworth Place		Transaction ID : SB23.125027
City Memphis	State TN	
Purpose of Disbursement CK 5479	Category/ Type	Amount of Each Disbursement this Period 5000.00
Candidate Name COHEN FOR CONGRESS *	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: TN District: 09	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. COHEN FOR CONGRESS *		Date of Disbursement MM / DD / YYYY 06 / 12 / 2014
Mailing Address 349 Kenilworth Place		Transaction ID : SB23.125031
City Memphis	State TN	
Purpose of Disbursement Redesignate: SHOULD BE PRIMARY	Category/ Type	Amount of Each Disbursement this Period -5000.00
Candidate Name COHEN FOR CONGRESS *	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: TN District: 09	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. COHEN FOR CONGRESS *		Date of Disbursement MM / DD / YYYY 06 / 12 / 2014
Mailing Address 349 Kenilworth Place		Transaction ID : SB23.125032
City Memphis	State TN	
Purpose of Disbursement Redesignate: FROM GENERAL TO PRIMARY	Category/ Type	Amount of Each Disbursement this Period 5000.00
Candidate Name COHEN FOR CONGRESS *	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: TN District: 09	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	

**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"/> 24	<input type="checkbox"/> 25	<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

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NAME OF COMMITTEE (In Full)
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. FRIENDS OF DAVE REICHERT *

Mailing Address P. O. Box 53322

City Bellevue State WA Zip Code 98015

Purpose of Disbursement
CK 5468

Candidate Name
FRIENDS OF DAVE REICHERT *

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: WA District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2014

Transaction ID : SB23.122420

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF DICK DURBIN *

Mailing Address PO BOX 1949

City SPRINGFIELD State IL Zip Code 62705

Purpose of Disbursement
CK 5469

Candidate Name
FRIENDS OF DICK DURBIN *

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: IL District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		21		2014

Transaction ID : SB23.122421

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. GARAMENDI FOR CONGRESS *

Mailing Address c/o California Political Law, Inc.
3605 Long Beach Blvd., Ste. 426

City Long Beach State CA Zip Code 90807

Purpose of Disbursement
CK 5473

Candidate Name
GARAMENDI FOR CONGRESS *

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: CA District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2014

Transaction ID : SB23.122426

Amount of Each Disbursement this Period

1500.00

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

7500.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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"/> 24	<input type="checkbox"/> 25	<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

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NAME OF COMMITTEE (In Full)
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. GRAVES FOR CONGRESS *

Mailing Address 1900 Frederick Blvd

City St Joseph State MO Zip Code 64501

Purpose of Disbursement
CK 5470

Candidate Name

GRAVES FOR CONGRESS *

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: MO District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		06		2014

Transaction ID : SB23.122422

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. KATHLEEN RICE FOR CONGRESS

Mailing Address 410 JERICHO TURNPIKE SUITE 200

City JERICHO State NY Zip Code 11753

Purpose of Disbursement
CK 5480

Candidate Name

KATHLEEN RICE FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: NY District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		12		2014

Transaction ID : SB23.122431

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR ARIZONA *

Mailing Address PO BOX 12011

City CASA GRANDE State AZ Zip Code 85130

Purpose of Disbursement
CK 5471

Candidate Name

KIRKPATRICK FOR ARIZONA *

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: AZ District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		06		2014

Transaction ID : SB23.122423

Amount of Each Disbursement this Period

1000.00

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

3500.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

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NAME OF COMMITTEE (In Full)
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. LOBIONDO FOR CONGRESS 2014

Mailing Address P.O. Box 550

City Vineland State NJ Zip Code 08362

Purpose of Disbursement
CK 5472

Candidate Name
LOBIONDO FOR CONGRESS 2014

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: NJ District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	4

Transaction ID : **SB23.122424**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. LOBIONDO FOR CONGRESS 2014

Mailing Address P.O. Box 550

City Vineland State NJ Zip Code 08362

Purpose of Disbursement
Redesignate: CK 5472

Candidate Name
LOBIONDO FOR CONGRESS 2014

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: NJ District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	4

Transaction ID : **SB23.125022**

Amount of Each Disbursement this Period

-	2	5	0	.	0	0
---	---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. LOBIONDO FOR CONGRESS 2014

Mailing Address P.O. Box 550

City Vineland State NJ Zip Code 08362

Purpose of Disbursement
Redesignate: FROM GENERAL TO PRIMARY

Candidate Name
LOBIONDO FOR CONGRESS 2014

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: NJ District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	4

Transaction ID : **SB23.125023**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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[MEMO ITEM]

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

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

2	5	0	0	.	0	0
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2	5	0	0	.	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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"/> 24	<input type="checkbox"/> 25	<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

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NAME OF COMMITTEE (In Full)
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. LOEBSACK FOR CONGRESS *

Mailing Address PO BOX 3013

City IOWA CITY State IA Zip Code 52244

Purpose of Disbursement
CK 5474

Candidate Name
LOEBSACK FOR CONGRESS *

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: IA District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			02			2014			

Transaction ID : SB23.122427

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. LOU BARLETTA FOR CONGRESS *

Mailing Address 1529 TERRACE BLVD
101 WEST BROAD STREET

City HAZLETON State PA Zip Code 18201

Purpose of Disbursement
CK 5477

Candidate Name
LOU BARLETTA FOR CONGRESS *

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: PA District: 11

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			12			2014			

Transaction ID : SB23.122429

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. TIM BISHOP FOR CONGRESS *

Mailing Address PO Box 437

City Farmingville State NY Zip Code 11738

Purpose of Disbursement
CK 5478

Candidate Name
TIM BISHOP FOR CONGRESS *

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: NY District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			12			2014			

Transaction ID : SB23.122428

Amount of Each Disbursement this Period

2500.00

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

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

5500.00

24000.00

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Kenneth D. Long

Mailing Address 14106 Davis Rd

City Woodstock State IL Zip Code 60098-7649

Purpose of Disbursement
CK 5475--REFUND INELIGIBLE P/R DEDUCTIONS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2014

Transaction ID : SB28A.122432

Amount of Each Disbursement this Period

285.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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

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

285.00

285.00
