

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

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

FOR LINE NUMBER: PAGE 358 OF 1229

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Air Line Pilots Association PAC**

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

**A. Kornacki, Daniel, , ,**

Mailing Address 110 Stonebriar Lane

City  
Fayetteville

State  
GA

Zip Code  
30215-5692

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Delta Air Lines

Occupation (for Individual)  
Airline Pilot

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2019

**Transaction ID : PR40389616790**

Amount of Each Receipt this Period

25.00

☐ Memo Item

P/R Deduction (\$12.50 Semi-Monthly)

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

**B. McMahon, Michael, J, ,**

Mailing Address 6012 Yeats Manor Dr  
103

City  
Tampa

State  
FL

Zip Code  
33616-1444

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Delta Air Lines

Occupation (for Individual)  
Airline Pilot

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2019

**Transaction ID : PR40390316790**

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$50.00 Semi-Monthly)

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

**C. Powell, Kevin, M, ,**

Mailing Address 165 Fallen Leaf Court

City  
Johns Creek

State  
GA

Zip Code  
30005-6795

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Delta Air Lines

Occupation (for Individual)  
Airline Pilot

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2019

**Transaction ID : PR40390416790**

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$21.00 Semi-Monthly)

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

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

167.00