

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

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

FOR LINE NUMBER: PAGE 379 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. Young, Carol, D, ,**

Mailing Address P.O. Box 146

City

Purcellville

State

VA

Zip Code

20134-0146

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

United Airlines

Occupation (for Individual)

Airline Pilot

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

**Transaction ID : PR40515916790**

Amount of Each Receipt this Period

30.00

☐ Memo Item

P/R Deduction (\$10.00 Monthly)

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

**B. Kuhn, David, R, ,**

Mailing Address 5719 Farmbrook Ln

City

Crystal Lake

State

IL

Zip Code

60014-3014

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

United Airlines

Occupation (for Individual)

Airline Pilot

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

**Transaction ID : PR40518416790**

Amount of Each Receipt this Period

30.00

☐ Memo Item

P/R Deduction (\$10.00 Monthly)

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

**C. DeArmond, Robert, H, ,**

Mailing Address 3309 1/2 W Granada St

City

Tampa

State

FL

Zip Code

33629-7133

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Federal Express

Occupation (for Individual)

Airline Pilot

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

**Transaction ID : PR40518716790**

Amount of Each Receipt this Period

20.00

☐ Memo Item

P/R Deduction (\$20.00 Monthly)

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

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

80.00