

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

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

FOR LINE NUMBER: PAGE 6 OF 22

(check only one)

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

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NAME OF COMMITTEE (In Full)

NETJETS INC. PAC

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

A. Atiyeh, Lowi, N., ,

Mailing Address 683 Theron Street

City
Pickerington

State
OH

Zip Code
43147

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NetJets Services, Inc.

Occupation (for Individual)

VP, Financial Planning & Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2019

Transaction ID : SA11AI.9993

Amount of Each Receipt this Period

100.00

☐ Memo Item
payroll deduction

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

B. Beale, Jennifer, E., ,

Mailing Address 4111 Bridgeway Ave.

City
Columbus

State
OH

Zip Code
43219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NetJets Services, Inc.

Occupation (for Individual)

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 05 / 2019

Transaction ID : SA11AI.9968

Amount of Each Receipt this Period

50.00

☐ Memo Item
payroll deduction

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

C. Beale, Jennifer, E., ,

Mailing Address 4111 Bridgeway Ave.

City
Columbus

State
OH

Zip Code
43219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NetJets Services, Inc.

Occupation (for Individual)

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2019

Transaction ID : SA11AI.9995

Amount of Each Receipt this Period

50.00

☐ Memo Item
payroll deduction

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

200.00

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