

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 OF 148

(check only one)

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

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NAME OF COMMITTEE (In Full)

Professional Aviation Safety Specialists PAC

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

A. Gartside, Scott, , ,

Mailing Address 740 2nd St S

City
HeathState
OHZip Code
43056FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FAAOccupation (for Individual)
Systems Specialist

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID : SA11Ai-CNP356683

Amount of Each Receipt this Period

140.00

☐ Memo Item

14 Payroll Deduction(s) - \$10.00 semimonthly

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

B. Gauthier, Paul, , ,

Mailing Address 11429 Southwest 25th St

City
YukonState
OKZip Code
73099FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FAAOccupation (for Individual)
Aviation Safety Inspector

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID : SA11Ai-CNP356689

Amount of Each Receipt this Period

140.00

☐ Memo Item

14 Payroll Deduction(s) - \$10.00 semimonthly

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

C. Geiman, James, , ,

Mailing Address 10199 Beach Rd

City
Beach ParkState
ILZip Code
60087FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FAAOccupation (for Individual)
Systems Specialist

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

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

Transaction ID : SA11Ai-CNP356692

Amount of Each Receipt this Period

280.00

☐ Memo Item

14 Payroll Deduction(s) - \$20.00 semimonthly

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

560.00

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