

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 139 OF 1178

☒ 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. McBride, Robert, L, ,

Mailing Address 4110 W. Moonlight Avenue

City
Spokane

State
WA

Zip Code
99208-6592

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 ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 30 / 2019

Transaction ID : PR38188416668

Amount of Each Receipt this Period

19.00

☐ Memo Item

P/R Deduction (\$9.50 Semi-Monthly)

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

B. Cullinan, Robert, M, , JR

Mailing Address 4092 Earney Rd

City
Woodstock

State
GA

Zip Code
30188-5218

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 30 / 2019

Transaction ID : PR38192616668

Amount of Each Receipt this Period

20.00

☐ Memo Item

P/R Deduction (\$10.00 Semi-Monthly)

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

C. Jordan, Travis, R, ,

Mailing Address 2783 Glenridge Cir

City
Merritt Island

State
FL

Zip Code
32953-2953

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Air Transport International

Occupation (for Individual)
Airline Pilot

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 30 / 2019

Transaction ID : PR381945316668

Amount of Each Receipt this Period

40.00

☐ Memo Item

P/R Deduction (\$20.00 Monthly)

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

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

79.00