

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)

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☒ 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. Malliarakis, Katina, N, ,

Mailing Address 5725 Yewing Way

City
Gainesville

State
VA

Zip Code
20155-1346

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United Airlines

Occupation (for Individual)
Airline Pilot

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

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

Transaction ID : PR38335816668

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

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

B. Hill, Kevin, E, ,

Mailing Address 5683 Bloomingdale Ct

City

Peachtree Corners

State
GA

Zip Code
30092-2490

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 Y
11 / 30 / 2019

Transaction ID : PR38339116668

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. Thiel, Edwin, B, ,

Mailing Address P.O. Box 680063

City

Park City

State
UT

Zip Code
84068-0063

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 ▼

1100.00

Date of Receipt

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

Transaction ID : PR38340216668

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

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

220.00