

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

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

FOR LINE NUMBER: PAGE 372 OF 1178

(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 ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID : PR40515916668

Amount of Each Receipt this Period

20.00

☐ 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 ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID : PR40518416668

Amount of Each Receipt this Period

20.00

☐ 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 ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID : PR40518716668

Amount of Each Receipt this Period

20.00

☐ Memo Item

P/R Deduction (\$20.00 Monthly)

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

60.00

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