

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. McMahon, Michael, J.,

Mailing Address 6012 Yeats Manor Dr
103

City
Tampa

State
FL

Zip Code
33616-1444

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : PR40390316291

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. Powell, Kevin, M.,

Mailing Address 165 Fallen Leaf Court

City

Johns Creek

State
GA

Zip Code
30005-6795

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 ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : PR40390416291

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$21.00 Monthly)

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

C. Freeman, Margaret, E.,

Mailing Address 226 Mainsail Dr

City

Third Lake

State
IL

Zip Code
60030-2628

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : PR40395316291

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

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

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

292.00