

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

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

FOR LINE NUMBER: PAGE 252 OF 558

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Lockheed Martin Corporation Employees' Political Action Committee**

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

**A. MCFARLAN, JOHN, D, , III**

Mailing Address 1 LOCKHEED BLVD

City  
FORT WORTH

State  
TX

Zip Code  
76108-3619

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Lockheed Martin

Occupation (for Individual)

ENGRG & SCIENCES SUPPORT VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2020

**Transaction ID : PR364389470847**

Amount of Each Receipt this Period

250.00

☐ Memo Item

P/R Deduction (\$50.00 Weekly)

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

**B. MARKS, BLAIR, C, ,**

Mailing Address 86 S COBB DR SE DEPT 62-14, ZONE 0

City

MARIETTA

State

GA

Zip Code

30063-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Lockheed Martin

Occupation (for Individual)

ETHICS ANALYSIS VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2020

**Transaction ID : PR364392670847**

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$10.00 Weekly)

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

**C. SNITCH, MARY, LASSITER, ,**

Mailing Address 6801 ROCKLEDGE DR

City

BETHESDA

State

MD

Zip Code

20817-1803

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Lockheed Martin

Occupation (for Individual)

BUS DEVEL ANALYST SR STF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2020

**Transaction ID : PR364394370847**

Amount of Each Receipt this Period

125.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

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

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

425.00