

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 206

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Airlines Inc. Political Action Committee (AAPAC)

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

A. Andersen, Nicholas, , ,

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
American Airlines, Inc.Occupation (for Individual)
Director, Labor Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2020

Transaction ID : 2020060210574-253

Amount of Each Receipt this Period

46.21

☐ Memo Item

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

B. Andersen, Nicholas, , ,

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
American Airlines, Inc.Occupation (for Individual)
Director, Labor Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2020

Transaction ID : 2020060312174-253

Amount of Each Receipt this Period

46.21

☐ Memo Item

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

C. Andrews, Julie, , ,

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
American Airlines, Inc.Occupation (for Individual)
Sr Engineer, IT Quality Assurance

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
05 / 22 / 2020

Transaction ID : 2020060312174-414

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

112.42

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