

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

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

FOR LINE NUMBER: PAGE 618 OF 668

(check only one)

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

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NAME OF COMMITTEE (In Full)

**AT&T Inc. Federal Political Action Committee (AT&T Federal PAC)**

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

**A. BLACKMON, AMBER, , ,**

Mailing Address 858 NW 22ND AVE

City  
CAMAS

State  
WA

Zip Code  
98607-9319

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AT&T Mobility Services LLC

Occupation (for Individual)  
APPLICATION SALES EXEC 2 MOBILI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 31 / 2019

**Transaction ID : PR97990512879**

Amount of Each Receipt this Period

30.00

☐ Memo Item

P/R Deduction (\$15.00 Semi-Monthly)

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

**B. MEYERS, SCOTT, J, ,**

Mailing Address 1305 YUMA DR

City  
FRISCO

State  
TX

Zip Code  
75033-1778

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AT&T Mobility Services LLC

Occupation (for Individual)  
REGIONAL OPERATIONS DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 31 / 2019

**Transaction ID : PR98004012879**

Amount of Each Receipt this Period

70.00

☐ Memo Item

P/R Deduction (\$35.00 Semi-Monthly)

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

**C. MINAIDES, MICHAEL, L, ,**

Mailing Address 272 SHORT HILLS DRIVE

City  
BRIDGEWATER

State  
NJ

Zip Code  
08807-1530

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AT&T Services, Inc.

Occupation (for Individual)  
AVP-SENIOR LEGAL COUNSEL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 31 / 2019

**Transaction ID : PR98073012879**

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$25.00 Semi-Monthly)

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

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

150.00