

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

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

FOR LINE NUMBER: PAGE 139 OF 173

(check only one)

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

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NAME OF COMMITTEE (In Full)

**UNITED AIRLINES, INC. POLITICAL ACTION COMMITTEE (UAPAC)**

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

**A. Rivkin, Robert, Samuel, ,**

Mailing Address 4 E Elm St

Unit 16N

City

Chicago

State

IL

Zip Code

60611-1000

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

United Airlines Inc.

Occupation (for Individual)

SVP General Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2704.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2019

**Transaction ID : 201910152134-377**

Amount of Each Receipt this Period

208.00

☐ Memo Item

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

**B. Rivkin, Robert, Samuel, ,**

Mailing Address 4 E Elm St

Unit 16N

City

Chicago

State

IL

Zip Code

60611-1000

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

United Airlines Inc.

Occupation (for Individual)

SVP General Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2704.00

Date of Receipt

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

**Transaction ID : 201910312135-376**

Amount of Each Receipt this Period

208.00

☐ Memo Item

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

**C. Rodkey, Christopher, , ,**

Mailing Address 63 Bachelor Creek Ct

POB 1330

City

Dubois

State

WY

Zip Code

82513

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

United Airlines Inc.

Occupation (for Individual)

MD - Program Management Office

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2019

**Transaction ID : 201910152134-325**

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

456.00

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