

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

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

FOR LINE NUMBER: PAGE 137 OF 250

(check only one)

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

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NAME OF COMMITTEE (In Full)
DELTA AIR LINES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. LEBEL, ROBERT, , ,

Mailing Address 1155 SHERIDAN CT NE

City
ATLANTA

State
GA

Zip Code
30324-3273

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DELTA AIR LINES

Occupation (for Individual)
MNG DIR_SPEC & SALES_CANADA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.44

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2020

Transaction ID : A103EF2FD82ED4356940

Amount of Each Receipt this Period

104.16

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. LEBEL, ROBERT, , ,

Mailing Address 1155 SHERIDAN CT NE

City
ATLANTA

State
GA

Zip Code
30324-3273

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DELTA AIR LINES

Occupation (for Individual)
MNG DIR_SPEC & SALES_CANADA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1041.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 29 / 2020

Transaction ID : A47A5F074F34A4B29887

Amount of Each Receipt this Period

104.16

☐ Memo Item

PAYROLL DEDUCTION: \$104.16/BI-MONTHLY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. LEE, MICHELLE, , ,

Mailing Address 4500 VIA MARINA

City
MARINA DEL REY

State
CA

Zip Code
90292-7214

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DELTA AIR LINES

Occupation (for Individual)
DIR_SW REGION SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

506.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2020

Transaction ID : AE6BBACE8D9654CE1AFE

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

228.32

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