

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

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

FOR LINE NUMBER: PAGE 181 OF 347

(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. LEE, MICHELLE, , ,**

Mailing Address 4500 VIA MARINA

City State Zip Code  
MARINA DEL REY CA 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 ▼

1833.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 27 / 2019

Transaction ID : A7F2F65CDF45B4C15BB3

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. LEIBBRANDT, DONALD, , ,**

Mailing Address 571 SUNSET BEACH DR

City State Zip Code  
VENICE FL 34293-2649

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DELTA AIR LINES

Occupation (for Individual)  
STATION MGR II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 15 / 2019

Transaction ID : A5513DAA396284F1DBDE

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. LEIBBRANDT, DONALD, , ,**

Mailing Address 571 SUNSET BEACH DR

City State Zip Code  
VENICE FL 34293-2649

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DELTA AIR LINES

Occupation (for Individual)  
STATION MGR II

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  
11 / 27 / 2019

Transaction ID : AF2B3E33BE9244009AA8

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

103.33