

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

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

FOR LINE NUMBER: PAGE 67 OF 107

(check only one)

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

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NAME OF COMMITTEE (In Full)

District No. 1-PCD, Marine Engineers' Beneficial Assoc. - Political Action Fund (MEBA-PAF)

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

A. Alonge, Matthew, , ,

Mailing Address 2201 SW 15th

City

Deerfield Beach

State

FL

Zip Code

33442-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MEBA vacation Trust

Occupation (for Individual)

Licensed Marine Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 31 / 2018

Transaction ID : 43045064

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

B. Fountas, John, , ,

Mailing Address PO Box 180810

City

Coronado

State

CA

Zip Code

92178-0810

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MEBA Vacation Trust

Occupation (for Individual)

Licensed Marine Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 31 / 2018

Transaction ID : 43045066

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Myatt, Thomas, G, ,

Mailing Address P O BOX 162

City

Stratton

State

ME

Zip Code

04982-0162

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MEBA Vacation Trust

Occupation (for Individual)

Licensed Marine Officer

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 31 / 2018

Transaction ID : 43045067

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

220.00

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