

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

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

FOR LINE NUMBER: PAGE 492 OF 590

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Altria Group, Inc. Political Action Committee (AltriaPAC)**

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

**A. Thomas, Joan, H, ,**

Mailing Address 3012 E Franklin St

City  
Richmond

State  
VA

Zip Code  
23223-7924

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Altria Client Services LLC

Occupation (for Individual)  
Assoc Mgr Aviation Cabin Safet

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 11 / 2019

**Transaction ID : 201910097215-664**

Amount of Each Receipt this Period

12.50

☐ Memo Item

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

**B. Thomas, Joan, H, ,**

Mailing Address 3012 E Franklin St

City  
Richmond

State  
VA

Zip Code  
23223-7924

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Altria Client Services LLC

Occupation (for Individual)  
Assoc Mgr Aviation Cabin Safet

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 25 / 2019

**Transaction ID : 201910237215-662**

Amount of Each Receipt this Period

12.50

☐ Memo Item

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

**C. Thomas, Mitchell, L, ,**

Mailing Address 4816 Fitzhugh Ave

City  
Richmond

State  
VA

Zip Code  
23230-3504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Altria Group Distribution Co

Occupation (for Individual)  
Mgr Warehouse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.56

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 11 / 2019

**Transaction ID : 201910097215-1348**

Amount of Each Receipt this Period

23.52

☐ Memo Item

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

48.52

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