

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Air Line Pilots Association PAC**

Full Name (Last, First, Middle Initial)

**A. GILLIBRAND FOR SENATE**

Mailing Address 126 C STREET NW  
2ND FLOOR

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Political Contribution

**011**  
Category/  
Type

Candidate Name  
**Gillibrand, Kirsten, , Sen.,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: NY District:

Date of Disbursement

/  /

FEC Identification Number

**C** C00413914

**Transaction ID : 30335297**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. AT THE TABLE!**

Mailing Address PO BOX 650496

City FRESH MEADOWS State NY Zip Code 11365

Purpose of Disbursement  
Political Contribution

**011**  
Category/  
Type

Candidate Name  
**AT THE TABLE!**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C** C00552489

**Transaction ID : 30335298**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. PINGREE FOR CONGRESS**

Mailing Address PO BOX 17613

City PORTLAND State ME Zip Code 04112

Purpose of Disbursement  
Political Contribution

**011**  
Category/  
Type

Candidate Name  
**Pingree, Chellie, , Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: ME District: 01

Date of Disbursement

/  /

FEC Identification Number

**C** C00433391

**Transaction ID : 30335299**

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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