

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

MASTERS, MATES AND PILOTS POLITICAL CONTRIBUTION FUND

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

A. Schiavone, John, L, ,

Mailing Address 2948 GOLDEN ASPEN DR

City

Grants Pass

State

OR

Zip Code

97527-6379

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Pensioner

Receipt For: 2020

☐ Primary

☐ General

☒ Other (specify) ▼

Other

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2020

Transaction ID : SA11AI.29016

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. SMITH, BRENDAN SEAN, , ,

Mailing Address 1018 WELLINGTON DR

City

Charleston

State

SC

Zip Code

29412-4823

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Various Shipping Companies

Occupation (for Individual)

Mariner

Receipt For: 2020

☐ Primary

☐ General

☒ Other (specify) ▼

Other

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2020

Transaction ID : SA11AI.29017

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

C. SORBER, NICK, , ,

Mailing Address 35174 FIRLOCK PARK BLVD

City

ST HELENS

State

OR

Zip Code

97051-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

I.O.M.M. & P.

Occupation (for Individual)

Port Agent

Receipt For: 2020

☐ Primary

☐ General

☒ Other (specify)

Other

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2020

Transaction ID : SA11AI.28940

Amount of Each Receipt this Period

100.00

☐ Memo Item

bi-weekly payroll deduction

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

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

800.00