

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

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

FOR LINE NUMBER: PAGE 11 OF 24

(check only one)

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

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NAME OF COMMITTEE (In Full)

**NETJETS INC. PAC**

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

**A. Dropsey, Mark, A., ,**

Mailing Address 443 Walhalla Road

City  
Columbus

State  
OH

Zip Code  
43215

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NetJets Services, Inc.

Occupation (for Individual)  
VP, Operations Planning

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

**Transaction ID : SA11AI.10225**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
payroll deduction

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

**B. Drummond, Mindy, L., ,**

Mailing Address 2557 McCumber Drive

City  
Lewis Center

State  
OH

Zip Code  
43035

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NetJets Services, Inc.

Occupation (for Individual)  
EVP, Employee & Owner Experience

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3075.00

Date of Receipt

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

**Transaction ID : SA11AI.10197**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
payroll deduction

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

**C. Drummond, Mindy, L., ,**

Mailing Address 2557 McCumber Drive

City  
Lewis Center

State  
OH

Zip Code  
43035

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NetJets Services, Inc.

Occupation (for Individual)  
EVP, Employee & Owner Experience

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3275.00

Date of Receipt

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

**Transaction ID : SA11AI.10226**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
payroll deduction

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

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

450.00