

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Professional Aviation Safety Specialists PAC

ADDRESS (number and street)

1200 G Street NW

Suite 750

Check if different  
than previously  
reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00286807

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y Y Y

D D / D D / Y Y Y Y Y Y

Y Y Y Y Y Y / Y Y Y Y Y Y

in the  
State of

C C

(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

D D / D D / Y Y Y Y Y Y

Y Y Y Y Y Y / Y Y Y Y Y Y

in the  
State of

C C

5. Covering Period

M M / D D / Y Y Y Y Y Y  
11 24 2020

through

M M / D D / Y Y Y Y Y Y  
12 31 2020

D D / D D / Y Y Y Y Y Y

Y Y Y Y Y Y / Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Perrone, Michael, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Perrone, Michael, , ,

Date

M M / D D / Y Y Y Y Y Y  
01 08 2021

D D / D D / Y Y Y Y Y Y

Y Y Y Y Y Y / Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Professional Aviation Safety Specialists PAC

Report Covering the Period: From:  /  /  To:  /  /

|                                                                                                                  | COLUMN A<br>This Period                | COLUMN B<br>Calendar Year-to-Date      |
|------------------------------------------------------------------------------------------------------------------|----------------------------------------|----------------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2020"/>                                              |                                        | <input type="text" value="222691.04"/> |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....                                                        | <input type="text" value="323690.42"/> |                                        |
| (c) Total Receipts (from Line 19) .....                                                                          | <input type="text" value="23375.72"/>  | <input type="text" value="215253.24"/> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="347066.14"/> | <input type="text" value="437944.28"/> |
| 7. Total Disbursements (from Line 31).....                                                                       | <input type="text" value=".00"/>       | <input type="text" value="90878.14"/>  |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="347066.14"/> | <input type="text" value="347066.14"/> |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value=".00"/>       |                                        |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <input type="text" value=".00"/>       |                                        |

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100