

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 72 OF 79
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN ASSOCIATION OF ORAL AND MAXILLOFACIAL SURGEONS POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Daniel Witcher

Mailing Address 4747 Orten St

City San Diego State CA Zip Code 92110

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Oral Surgeon

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
12 / 31 / 2015
Transaction ID : SA11AI.28489

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Robert Wright

Mailing Address 1502 Forsyth St Ste A

City Macon State GA Zip Code 31201

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Oral Surgeon

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
12 / 03 / 2015
Transaction ID : SA11AI.28490

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. George Yellich

Mailing Address 1663 Dominican Way Suite 112

City Santa Cruz State CA Zip Code 95065

FEC ID number of contributing federal political committee. **C**

Name of Employer Santa Cruz Oral and Maxillofac Occupation Oral Surgeon

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
12 / 04 / 2015
Transaction ID : SA11AI.28491

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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