SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 94 / 131
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Emergency Medicine Political Action Committee

A.
Full Name (Last, First, Middle Initial): Dr. Mark E Baier
Mailing Address: PO Box 5515
City: Tahoe City State: CA Zip Code: 96145-5515
FEC ID number of contributing federal political committee: C
Name of Employer: Washoe Med Ctr
Occupation: Emergency Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 23 2003
Transaction ID: 1264212
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial): Dr. William B Chung
Mailing Address: 11900 Snowfield Ct
City: Traverse City State: MI Zip Code: 49686-9250
FEC ID number of contributing federal political committee: C
Name of Employer: Munson Med Ctr
Occupation: Emergency Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 23 2003
Transaction ID: 1264216
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial): Dr. Stephen Paul Stewart
Mailing Address: 2619 Jordans Grove Rd
City: Marion State: IA Zip Code: 52302-9633
FEC ID number of contributing federal political committee: C
Name of Employer: ECIAC LLP
Occupation: Emergency Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 12 23 2003
Transaction ID: 1264213
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 900.00

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