

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)	PAGE 7 OF 28
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Psychiatric Association Political Action Committee

A. Eugene Becker
Full Name (Last, First, Middle Initial)
Mailing Address 9 Cedar Dr
City State Zip Code
Great Neck NY 11021-1954
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self Employed Physician
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 20 / 2012
Transaction ID : C1631746
Amount of Each Receipt this Period
250.00

B. Jeffrey I Bennett
Full Name (Last, First, Middle Initial)
Mailing Address 700 Williams Blvd
City State Zip Code
Springfield IL 62704-2875
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self Employed Physician
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 20 / 2012
Transaction ID : C1627318
Amount of Each Receipt this Period
400.00

C. Robert Scott Benson
Full Name (Last, First, Middle Initial)
Mailing Address 5190 Bayou Blvd
Ste 6
City State Zip Code
Pensacola FL 32503-2162
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self Employed Physician
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 15 / 2012
Transaction ID : C1630566
Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1650.00
TOTAL This Period (last page this line number only).....▶	