

**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 11 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)  
**A. Michael R Baker**

Mailing Address **6541 N Placita Alta Reposa**

City **Tucson** State **AZ** Zip Code **85750-4204**

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

Name of Employer **Radiology Ltd** Occupation **Diagnostic Radiologist**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	1	5

**Transaction ID : C2950076**

Amount of Each Receipt this Period  

5	0	0	0	0	0	0	0	0	0

**500.00**

Full Name (Last, First, Middle Initial)  
**B. Mack K Bandler**

Mailing Address **2656 Oak View Cir**

City **Medford** State **OR** Zip Code **97504-6320**

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

Name of Employer **Medford Radiological Group** Occupation **Diagnostic Radiologist**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	5

**Transaction ID : C2969246**

Amount of Each Receipt this Period  

1	0	0	0	0	0	0	0	0	0

**1000.00**

Full Name (Last, First, Middle Initial)  
**C. Kevin Bannon**

Mailing Address **1759 Creek View Drive**

City **Fogelsville** State **PA** Zip Code **18051**

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

Name of Employer **Medical Imaging of Lehigh Valley** Occupation **Radiologist**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	1	5

**Transaction ID : C2957140**

Amount of Each Receipt this Period  

2	5	0	0	0	0	0	0	0	0

**250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1750.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	