

**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 74 OF 108
	<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**American College of Radiology Association PAC**

**A. John M Rogers**  
Full Name (Last, First, Middle Initial)

Mailing Address 802 West Gap Creek Road

City Greer State SC Zip Code 29651-5065

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

Name of Employer Greenville Radiology Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 11 / 2015  
**Transaction ID : C3022852**

Amount of Each Receipt this Period 42.00

**B. Steven Gregory Rogers**  
Full Name (Last, First, Middle Initial)

Mailing Address 926 River Oak Dr

City North Augusta State SC Zip Code 29841-3282

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

Name of Employer Brown and Associates Occupation Diagnostic Radiologist

Receipt For: 2016  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 08 / 2015  
**Transaction ID : C3025489**

Amount of Each Receipt this Period 500.00

**C. Toni C Roth**  
Full Name (Last, First, Middle Initial)

Mailing Address 7849 Stanford Ave

City Saint Louis State MO Zip Code 63130-3611

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

Name of Employer Central Illinois Neurosciences Occupation Diagnostic Radiologist

Receipt For: 2016  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 04 / 2015  
**Transaction ID : C3045411**

Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 592.00

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