SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 96 / 142

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial): JOHN PAPPAS
Mailing Address: 1296 INDIAN MOUND E
City: BLOOMFIELD HILLS State: MI Zip Code: 48301
FEC ID number of contributing federal political committee: C
Name of Employer: SOAA
Occupation: ANESTHESIOLOGIST
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 11 2003
Transaction ID: SA11A1.25490
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): RICHARD PARK
Mailing Address: 11299 ROSS CT
City: UNION State: KY Zip Code: 41091
FEC ID number of contributing federal political committee: C
Name of Employer: IAPSC
Occupation: ANESTHESIOLOGIST
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 11 2003
Transaction ID: SA11A1.25290
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): HARRY PARR
Mailing Address: 4725 TULLY RD
City: BLOOMFIELD HILLS State: MI Zip Code: 48302
FEC ID number of contributing federal political committee: C
Name of Employer: SOAA
Occupation: ANESTHESIOLOGIST
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 11 2003
Transaction ID: SA11A1.25489
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1500.00**

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