

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 113 OF 145
(check only one)
 11a 11b 11c 12
 13 14 15 16 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 MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A. Mr. Bernard Hengesbaugh
 Full Name (Last, First, Middle Initial)
 Mailing Address 330 North Wabash Avenue
 City Chicago State IL Zip Code 60611-3586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AMERICAN MEDICAL ASSOCIATION Occupation AMA Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2015
Transaction ID : 68850792
 Amount of Each Receipt this Period
 2500.00

B. Venkat Kondragunta Rao MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 11706 Kings Colony
 City Grand Blanc State MI Zip Code 48439-8659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2015
Transaction ID : 68850793
 Amount of Each Receipt this Period
 1000.00

C. James Arthur Bull MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 8230 217th St N
 City Port Byron State IL Zip Code 61275-9604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GENESIS HEALTH SYSTEM Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2015
Transaction ID : 68850794
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 4000.00
TOTAL This Period (last page this line number only)..... ▶