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

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NAME OF COMMITTEE (In Full)
Spine PAC of the National Association of Spine Specialists

A. Full Name (Last, First, Middle Initial)
Dr. James G. Lindley MD

Mailing Address 17 W Bluff Dr

City: Savannah | State: GA | Zip Code: 31406-7504

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 ▼ 500.00

Date of Receipt: 10 / 07 / 2013

Transaction ID : SA11AI.7613

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Dr. James M. Loddengaard

Mailing Address 1244 Via Landeta

City: Palos Verdes Estates | State: CA | Zip Code: 90274

FEC ID number of contributing federal political committee. C

Name of Employer: | Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 24 / 2013

Transaction ID : SA11AI.7642

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Dr. Don K. Moore MD

Mailing Address 9077 S US Highway 1

City: Port Saint Lucie | State: FL | Zip Code: 34952-3405

FEC ID number of contributing federal political committee. C

Name of Employer: Florida Orthopaedic Specialist | Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 09 / 2013

Transaction ID : SA11AI.7619

Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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