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 19 / 41

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Seperate Segregated Fund

A.
Full Name (Last, First, Middle Initial): Michael A Geisler
Mailing Address: 8177 Seven Mile Dr
City: Ponte Vedra Beach State: FL Zip Code: 32082-4607
FEC ID number of contributing federal political committee.
Name of Employer: Mayo Clinic
Occupation: CRNA
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 05 15 2002
Amount of Each Receipt this Period: 300.00
Transaction ID: 8946846

B.
Full Name (Last, First, Middle Initial): Lawrence H Kranz
Mailing Address: 571 Tusculum Ave
City: Cincinnati State: OH Zip Code: 45226-1773
FEC ID number of contributing federal political committee.
Name of Employer: Jewish Hospital, Cincinnati Oh
Occupation: Staff CRNA
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt: 05 15 2002
Amount of Each Receipt this Period: 500.00
Transaction ID: 8946891

C.
Full Name (Last, First, Middle Initial): Lavonna K Sanders
Mailing Address: 28750 East Apache Street
City: Catoosa State: OK Zip Code: 74015-5702
FEC ID number of contributing federal political committee.
Name of Employer: Sanders Nurse Anesthesia Services, Inc
Occupation: CRNA
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 05 15 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: 8946991

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1050.00**

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