SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 37
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Iowa Medical Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Beth Hothan-Zielinski
Mailing Address 407 S White Street
Suite 102
City: Mount Pleasant State: IA Zip Code: 52641
FEC ID number of contributing federal political committee: C
Name of Employer: Surgical Services of Mt Pleasant
Occupation: Physician
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 31 2003
Transaction ID: SA11A1.6399
Amount of Each Receipt this Period: 500.00
Contribution

B.
Full Name (Last, First, Middle Initial)
Dr. Michael Todd Kafka
Mailing Address 2720 Stone Park Blvd
City: Sioux City State: IA Zip Code: 51104
FEC ID number of contributing federal political committee: C
Name of Employer: Pathology Medical Services
Occupation: Physician
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 13 2003
Transaction ID: SA11A1.6358
Amount of Each Receipt this Period: 250.00
Contribution

C.
Full Name (Last, First, Middle Initial)
Dr. Janice A Kirsch
Mailing Address 1010 4th Street, SW
Suite 240
City: Mason City State: IA Zip Code: 50401
FEC ID number of contributing federal political committee: C
Name of Employer: Mercy Womens' Health Center
Occupation: Physician
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 02 21 2003
Transaction ID: SA11A1.6276
Amount of Each Receipt this Period: 250.00
Contribution

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1000.00

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