SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 61
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

A.
Full Name (Last, First, Middle Initial)
Fernando Calero, MD
Mailing Address Torre San Pablo 103
Calle South Cruz #68
City: Bayamon State: PR Zip Code: 00961
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 25 2003
Transaction ID: SA11A1.7532
Amount of Each Receipt this Period: 375.00

B.
Full Name (Last, First, Middle Initial)
Theodore Calonios, MD
Mailing Address 5 Industrial Dr., Ste. 109
City: Mashpee State: MA Zip Code: 02649
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 09 15 2003
Transaction ID: SA11A1.7631
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Bruce Carter, MD
Mailing Address 875 Oak St., S.E., Ste 4060
City: Salem State: OR Zip Code: 97301
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 06 2003
Transaction ID: SA11A1.7391
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1375.00

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