SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 24
(check only one)
[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)
Cynthia A Durden
Mailing Address 2430 8 Woodley Road
City: Ramer State: AL Zip Code: 36069-5412
FEC ID number of contributing federal political committee: C
Name of Employer: Baptist Medical Center
Occupation: CRNA
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 02 12 2004
Transaction ID: 17887160
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Charles H Keeling II
Mailing Address 316 Chessie Ln
City: Harpers Ferry State: WV Zip Code: 25425-3090
FEC ID number of contributing federal political committee: C
Name of Employer: Jefferson Memorial Hospital
Occupation: CRNA
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 02 12 2004
Transaction ID: 17887149
Amount of Each Receipt this Period: 400.00

C.
Full Name (Last, First, Middle Initial)
Heather A Wertel
Mailing Address PO Box 133
City: Forksville State: PA Zip Code: 18616-0133
FEC ID number of contributing federal political committee: C
Name of Employer: Susquehana Health Systems
Occupation: CRNA
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 365.00
Date of Receipt: 02 12 2004
Transaction ID: 17887060
Amount of Each Receipt this Period: 365.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1015.00**

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