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 32 / 49

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

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. John Derr

Mailing Address 1320 North Veitech Street Apt 820
PAYROLL DEDUCTION

City: Arlington
State: VA
Zip Code: 22201-6214

FEC ID number of contributing federal political committee: C

Name of Employer: AHCA
Occupation: Director, Strat. Action Group

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
1030.68

Date of Receipt
09 30 2003

Transaction ID: 17059919

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 200.00

TOTAL This Period (last page this line number only) ..... ▶ 71915.36