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 28 / 179

[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): Mark A Klapperich
Mailing Address: 164 Sawtooth Oak Lane
City: Easley | State: SC | Zip Code: 29640-7614
FEC ID number of contributing federal political committee: C
Name of Employer: St. Francis Memorial Hospital
Occupation: CRNA
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 03 07 2003
Transaction ID: 14887975
Amount of Each Receipt this Period: 400.00

B.
Full Name (Last, First, Middle Initial): Sandra R Holt
Mailing Address: 950 Elkins Lake
City: Huntsville | State: TX | Zip Code: 77340-8808
FEC ID number of contributing federal political committee: C
Name of Employer: BAPTIST MONCLAIRE
Occupation: CRNA
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 03 07 2003
Transaction ID: 14886695
Amount of Each Receipt this Period: 400.00

C.
Full Name (Last, First, Middle Initial): Gregory D Henderson
Mailing Address: PO Box 14154
City: Surfside Beach | State: SC | Zip Code: 29587-4154
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: CRNA
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 07 2003
Transaction ID: 14886814
Amount of Each Receipt this Period: 250.00

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

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