

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 8 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Veterinary Medical Association Political Action Committee

A. Dr Charles Alfred Lemme
 Full Name (Last, First, Middle Initial)
 Mailing Address 819 Fernwood Dr NE
 City Cedar Rapids State IA Zip Code 52402-1231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blairs Ferry Pet Hospital PC Occupation Veterinarian
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 366.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2015
Transaction ID : 38928607
 Amount of Each Receipt this Period
 366.00

B. Dr Lawrence Kosmin
 Full Name (Last, First, Middle Initial)
 Mailing Address 1400 E Ocean Blvd Unit 2102
 City Long Beach State CA Zip Code 90802-6939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Veterinarian
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2015
Transaction ID : 38928613
 Amount of Each Receipt this Period
 50.00

c. Dr Lyle P Vogel
 Full Name (Last, First, Middle Initial)
 Mailing Address 206 Lord Granville Dr
 City Morehead City State NC Zip Code 28557-8952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Veterinarian
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2015
Transaction ID : 38928614
 Amount of Each Receipt this Period
 365.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 781.00
TOTAL This Period (last page this line number only)..... ▶