

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

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

FOR LINE NUMBER: PAGE 85 OF 178
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Hospital Association PAC

A. Mr. M Kenneth Posey
 Full Name (Last, First, Middle Initial)
 Mailing Address P O Box 527
 City State Zip Code
 Bay Springs MS 39422-0527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Jasper General Hospital Administrator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 415.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2011
Transaction ID : 19501302
 Amount of Each Receipt this Period
 415.00

B. Mr. John R Broberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 1020 Parkshire Cir
 City State Zip Code
 Manhattan KS 66503-2475
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Mercy Regional Health Center President and Chief Executive Officer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2011
Transaction ID : 19503060
 Amount of Each Receipt this Period
 250.00

C. Mr. Dennis L George
 Full Name (Last, First, Middle Initial)
 Mailing Address P O Box 189
 City State Zip Code
 Burlington KS 66839-0189
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Coffey County Hospital Chief Executive Officer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2011
Transaction ID : 19503074
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 915.00
TOTAL This Period (last page this line number only)..... ▶