

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 218 OF 405
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Society of Anesthesiologists Political Action Committee

A. Gregory Marino M.D.
Full Name (Last, First, Middle Initial)

Mailing Address 2626 E 66th St

City Tulsa State OK Zip Code 74136-1248

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue cross oklahoma Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 10 / 2014
Transaction ID : C2800099

Amount of Each Receipt this Period 50.00

B. Kurt W. Markgraf M.D.
Full Name (Last, First, Middle Initial)

Mailing Address 3663 McKinley Ave

City Fort Myers State FL Zip Code 33901

FEC ID number of contributing federal political committee. **C**

Name of Employer Medical Anesthesia and Pain Management Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 666.72

Date of Receipt 08 / 12 / 2014
Transaction ID : C2800412

Amount of Each Receipt this Period 83.34

C. Gregory B. Marsh M.D.
Full Name (Last, First, Middle Initial)

Mailing Address 1931 26th Ave East

City Seattle State WA Zip Code 98112

FEC ID number of contributing federal political committee. **C**

Name of Employer PAS Occupation anesthesiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2014
Transaction ID : C2816909

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 383.34

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