

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 6
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Medical Group Association PAC

A. Full Name (Last, First, Middle Initial)
Richard Cooper

Mailing Address 15512 27th Drive SE

City State Zip Code
Mill Creek WA 98012

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

Name of Employer Occupation
The Everett Clinic CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.4338

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Alan Schefer

Mailing Address 90 S. Bedford Road

City State Zip Code
Mount Kisco NY 10549

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

Name of Employer Occupation
Mount Kisco Medical Group MD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 6

Transaction ID: SA11A1.4337

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	750.00