

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

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

FOR LINE NUMBER: PAGE 11 OF 121
(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 College of Radiology Association Political Action Committee

A. Dr. Erik Maurer
Full Name (Last, First, Middle Initial)
Mailing Address 9141 Basher Dr
City Anchorage State AK Zip Code 99507-1290
FEC ID number of contributing federal political committee. **C**
Name of Employer Alaska Radiology Associates Occupation Diagnostic Radiologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt
06 / 10 / 2011
Transaction ID : 40549036
Amount of Each Receipt this Period
1000.00

B. Dr. W Bryan Winn
Full Name (Last, First, Middle Initial)
Mailing Address 5835 Pominence Pointe Dr
City Anchorage State AK Zip Code 99516-5415
FEC ID number of contributing federal political committee. **C**
Name of Employer Alaska Radiology Associates Occupation Diagnostic Radiologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt
06 / 10 / 2011
Transaction ID : 40549064
Amount of Each Receipt this Period
1000.00

c. Dr. Neal J. Clinger
Full Name (Last, First, Middle Initial)
Mailing Address 6076 S View Ave
City Idaho Falls State ID Zip Code 83404-7781
FEC ID number of contributing federal political committee. **C**
Name of Employer Medical Imaging Associates Occupation Diagnostic Radiologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt
06 / 10 / 2011
Transaction ID : 40549065
Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2400.00
TOTAL This Period (last page this line number only)..... ▶