

**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 203 OF 303
	<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)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Prasad V Gourineni MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 3420 Adams Rd
 City Oak Brook State IL Zip Code 60523-2708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed
 Occupation Orthopaedic Surgeon
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : 5816901
 Amount of Each Receipt this Period
 250.00

B. Terry Jackman Beal MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1309 Eagle Trail
 City Copperas Cove State TX Zip Code 76522-1967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed
 Occupation Orthopaedic Surgeon
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : 5816902
 Amount of Each Receipt this Period
 750.00

C. Peter T Hurley MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2048 2nd St N.W.
 City Hickory State NC Zip Code 28601-1202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ortho Carolina
 Occupation Orthopaedic Surgeon
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : 5816903
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	