

**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 35 OF 52
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**AMERICAN ACADEMY OF OTOLARYNGOLOGY-HEAD AND NECK SURGERY ENT PAC**

Full Name (Last, First, Middle Initial)  
**A. Michael G Stewart MD MPH**

Mailing Address 1305 York Ave Fl 5  
Dept of Orl

City State Zip Code  
New York NY 10021-5663

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

Name of Employer Occupation  
Weill Cornell Med Clg Professor and Chairman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 14 / 2013  
**Transaction ID : 4908752**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. Brenda Hargett CPA, CAE**

Mailing Address 1650 Diagonal Rd

City State Zip Code  
Alexandria VA 22314-2857

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

Name of Employer Occupation  
American Academy of Otolaryngology - H Chief Operating Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 14 / 2013  
**Transaction ID : 4908754**

Amount of Each Receipt this Period  
365.00

Full Name (Last, First, Middle Initial)  
**c. Dr Frank G Shechtman MD**

Mailing Address 7 Seymour Pl W

City State Zip Code  
Armonk NY 10504-2516

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

Name of Employer Occupation  
ENT & Allergy Associates Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 14 / 2013  
**Transaction ID : 4908755**

Amount of Each Receipt this Period  
365.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1230.00
<b>TOTAL</b> This Period (last page this line number only).....▶	