

**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 101 OF 213
	<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	<input type="checkbox"/> 17

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

A. Rajiv Lingaraju M.D.
Full Name (Last, First, Middle Initial)

Mailing Address 2200 Arch Street #602

City Philadelphia	State PA	Zip Code 19103
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FEC ID number of contributing federal political committee. **C**

Name of Employer West Jersey Anesthesia Associates	Occupation Anesthesiologist
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **351.69**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	17	/	2015

Transaction ID : C3215585

Amount of Each Receipt this Period

41.67

B. Robert J. Link M.D.
Full Name (Last, First, Middle Initial)

Mailing Address 639 N. Mulberry

City Elizabethtown	State KY	Zip Code 42701
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FEC ID number of contributing federal political committee. **C**

Name of Employer HEARTLAND ANESTH	Occupation ANESTHESIOLOGIST
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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
12	/	11	/	2015

Transaction ID : C3208271

Amount of Each Receipt this Period

500.00

C. Jonathan Lipps M.D.
Full Name (Last, First, Middle Initial)

Mailing Address 827 S 5th St

City Columbus	State OH	Zip Code 43206
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FEC ID number of contributing federal political committee. **C**

Name of Employer Ohio State University	Occupation Anesthesiologist
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.01**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	26	/	2015

Transaction ID : C3220590

Amount of Each Receipt this Period

41.67

SUBTOTAL of Receipts This Page (optional).....▶	583.34
TOTAL This Period (last page this line number only).....▶	