

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

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

FOR LINE NUMBER: PAGE 8 / 8
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN ASSOCIATION FOR GERIATRIC PSYCHIATRY POLITICAL ACTION COMMITTEE (AAGP-AC)

A. Full Name (Last, First, Middle Initial)
 Elliott Stein, MD
 Mailing Address 4300 Alton Rd.
 #360
 City Miami Beach State FL Zip Code 33140
 Date of Receipt 01 / 24 / 2008
Transaction ID: SA11AI.4915
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Adult and Geriatric Psychiatry Occupation geriatric psychiatrist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

B. Full Name (Last, First, Middle Initial)
 Hai Tsao, MD
 Mailing Address 69 Station Road
 City Glen Mills State PA Zip Code 19342-0000
 Date of Receipt 01 / 28 / 2008
Transaction ID: SA11AI.4905
 Amount of Each Receipt this Period 240.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mercy Fitzgerald Hospital Occupation Geriatric Psychiatrist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

SUBTOTAL of Receipts This Page (optional) ► **490.00**
TOTAL This Period (last page this line number only) ► **1940.00**