

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

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

FOR LINE NUMBER: PAGE 40 OF 138

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Feeley, Kathleen, M, ,

Mailing Address 1118 State Highway 130

City  
Laramie

State  
WY

Zip Code  
82070-9760

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Employee of Comanche County Memorial H

Occupation (for Individual)

Certified Registered Nurse Anesthetist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2019

Transaction ID : 43E088DCD6D23917DF75

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fenn, Amanda, H, ,

Mailing Address 1212 Crystal Lake Cir

City

Virginia Beach

State

VA

Zip Code

23451-3848

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Portsmouth anesthesia associates

Occupation (for Individual)

Crna

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  
04 / 06 / 2019

Transaction ID : ECE74EE7B04F4B56BD84

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fiaschetti, Donna, J, ,

Mailing Address 9312 Harrodsburg Rd

City

Wilmore

State

KY

Zip Code

40390-9754

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Baptist Anesthesia

Occupation (for Individual)

Nurse Anesthetist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

333.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2019

Transaction ID : 4016B10B25FAC3F2B814

Amount of Each Receipt this Period

83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

416.66