

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)

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

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NAME OF COMMITTEE (In Full)

American Academy of Neurology BrainPAC

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

A. Finney, Glen, R., Dr.,

Mailing Address 828 Homestead Dr

City
Dallas

State
PA

Zip Code
18612-7227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Geisinger Health

Occupation (for Individual)
Behavioral Neurology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

723.28

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2020

Transaction ID : 44561709

Amount of Each Receipt this Period

723.28

☐ Memo Item

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

B. Finney, Glen, R., Dr.,

Mailing Address 828 Homestead Dr

City
Dallas

State
PA

Zip Code
18612-7227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Geisinger Health

Occupation (for Individual)
Behavioral Neurology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

932.28

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2020

Transaction ID : 44561711

Amount of Each Receipt this Period

209.00

☐ Memo Item

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

C. Finney, Glen, R., Dr.,

Mailing Address 828 Homestead Dr

City
Dallas

State
PA

Zip Code
18612-7227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Geisinger Health

Occupation (for Individual)
Behavioral Neurology

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2020

Transaction ID : 44561875

Amount of Each Receipt this Period

17.72

☐ Memo Item

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

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

950.00