FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — **TYPE OR PRINT ▼** — Example: If typing, type over the lines. 12FE4M5

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

ADDRESS (number and street) ▼

10275 W. Higgins Rd

Suite 500 - c/o Finance Department

Check if different than previously reported. (ACC)

Rosement | IL | 60018 –

CITY ▲ | STATE ▲ | ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00173153

3. IS THIS REPORT [X] NEW (N) **OR** [ ] AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- [ ] April 15 Quarterly Report (Q1)
- [ ] July 15 Quarterly Report (Q2)
- [ ] October 15 Quarterly Report (Q3)
- [ ] January 31 Year-End Report (YE)
- [ ] July 31 Mid-Year Report (Non-election Year Only) (MY)
- [ ] Termination Report (TER)

(b) Monthly Report Due On:

- [ ] Feb 20 (M2)
- [ ] Mar 20 (M3)
- [ ] Apr 20 (M4)
- [ ] May 20 (M5)
- [ ] Jun 20 (M6)
- [X] Jul 20 (M7)
- [ ] Aug 20 (M8)
- [ ] Sep 20 (M9)
- [ ] Oct 20 (M10)
- [ ] Nov 20 (M11) (Non-Election Year Only)
- [ ] Dec 20 (M12) (Non-Election Year Only)
- [ ] Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: [ ] Primary (12P) [ ] General (12G) [ ] Runoff (12R) [ ] Convention (12C) [ ] Special (12S)

Election on M M / D D / Y Y Y Y in the State of

(d) 30-Day **POST**-Election Report for the: [ ] General (30G) [ ] Runoff (30R) [ ] Special (30S)

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 06 / 01 / 2025 through 06 / 30 / 2025

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer: Lusis, Ingrida, , ,

Signature of Treasurer: *Lusis, Ingrida, , ,* Date: 07 / 17 / 2025

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only							

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 05/2016)

Write or Type Committee Name

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

Report Covering the Period: From: 06 / 01 / 2025 To: 06 / 30 / 2025

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2025		1333943.72
(b) Cash on Hand at Beginning of Reporting Period	1533193.80	
(c) Total Receipts (from Line 19)	68140.39	458890.47
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1601334.19	1792834.19
7. Total Disbursements (from Line 31)	157500.00	349000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1443834.19	1443834.19
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

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

Report Covering the Period: From: 06 / 01 / 2025 To: 06 / 30 / 2025

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	51971.44	326454.96
(ii) Unitemized	16168.95	132435.51
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	68140.39	458890.47
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶	68140.39	458890.47
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	68140.39	458890.47
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	68140.39	458890.47

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	157500.00	344000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations)	0.00	5000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	157500.00	349000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	157500.00	349000.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	68140.39	458890.47
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	68140.39	458890.47
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	0.00	0.00

Image# 202507179763585111

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 6 OF 170

☒ 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)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Abraham, Bibin, , ,

Mailing Address 9802 Romo St

City: Irving | State: TX | Zip Code: 75063-0051

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Parkland Health & Hospital System
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 06 / 12 / 2025
Transaction ID : 460BA8FA3BFA90C7012C

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Adenusi, Bimpe, Z, ,

Mailing Address 435 W Brookhaven Rd

City: Brookhaven | State: PA | Zip Code: 19015-1801

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Jefferson College of Nursing
Occupation (for Individual): Program Administrator/ Division Chief

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 749.98

Date of Receipt: 06 / 18 / 2025
Transaction ID : 4BD996884A73D2A0EDD7

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Airth, Logan, N, ,

Mailing Address 3948 3rd St S # 202

City: Jacksonville Beach | State: FL | Zip Code: 32250-5847

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): 1099
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 958.31

Date of Receipt: 06 / 20 / 2025
Transaction ID : 49D7AFA395E5D5E7C108

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 266.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585112

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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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ambrose, Theodore, J, ,

Mailing Address 48 Alexis Dr

City: Bloomsburg | State: PA | Zip Code: 17815-7718

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Geisinger Health System
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1194.98

Date of Receipt: 06 / 16 / 2025
Transaction ID : 4F38A9233B7FD4A84F66

Amount of Each Receipt this Period: 50.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ambrose, Theodore, J, ,

Mailing Address 48 Alexis Dr

City: Bloomsburg | State: PA | Zip Code: 17815-7718

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Geisinger Health System
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1194.98

Date of Receipt: 06 / 30 / 2025
Transaction ID : 4B4997FF4453602B48DF

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Anderson, Michael, J, ,

Mailing Address 1525 Poplar Ln

City: North Liberty | State: IA | Zip Code: 52317-4744

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Heartland Anesthesia & Consulting
Occupation (for Individual): Chief Operating Officer / Certified Re

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1499.98

Date of Receipt: 06 / 24 / 2025
Transaction ID : 42029A9A2608B7FBC946

Amount of Each Receipt this Period: 208.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 341.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585113

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Anderson, Tyler, John, ,

Mailing Address 25 Schoolside Dr

City: Scott Township | State: PA | Zip Code: 18433-9761

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Geisinger Wyoming Valley
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 432.46

Date of Receipt: 06 / 28 / 2025
Transaction ID : 48648B7C14EF9E10A465

Amount of Each Receipt this Period: 30.41

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ardizzone, Laura, L, ,

Mailing Address 480 Main St
Apt 3D

City: New York | State: NY | Zip Code: 10044-0406

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): MSK
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 341.22

Date of Receipt: 06 / 27 / 2025
Transaction ID : 454A8F455E5D9C91461B

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ashlock, Becky, J, ,

Mailing Address 7207 Brooke Dr

City: Colleyville | State: TX | Zip Code: 76034-7309

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Kaiser
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 06 / 14 / 2025
Transaction ID : 4DF28D80CF6FAA1CB626

Amount of Each Receipt this Period: 50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 163.74

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585114

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Austin, Robert, James, , III

Mailing Address 7 Bayou Ct

City: Roswell | State: NM | Zip Code: 88201-3478

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Mjolnir Anesthesia, LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 24 / 2025
Transaction ID : 43B79D1E70EF3618C7B6

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Awai, Michael, SK, ,

Mailing Address 12345 Gately Ridge Ct

City: Jacksonville | State: FL | Zip Code: 32225-5842

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Advent Palm Coast
Occupation (for Individual): Nurse Anesthesiologist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 10 / 2025
Transaction ID : 4202B6A2701EFCC2D9A0

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Baghai, Ali, James, ,

Mailing Address 15231 N 45th Pl

City: Phoenix | State: AZ | Zip Code: 85032-4840

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Arizona Anesthesia Solutions
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 27 / 2025
Transaction ID : 4CFDBCD5D136D5C266E1

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 283.33

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585115

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ballister, Michele, Marie, ,

Mailing Address 3616 Billings St

City: Mount Pleasant | State: SC | Zip Code: 29466-6888

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Medical University of South Carolina
Occupation (for Individual): CRNA - Associate Professor

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 566.65

Date of Receipt: 06 / 01 / 2025
Transaction ID : 46BA8FAF2D10B0C6A015

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ballister, Michele, Marie, ,

Mailing Address 3616 Billings St

City: Mount Pleasant | State: SC | Zip Code: 29466-6888

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Medical University of South Carolina
Occupation (for Individual): CRNA - Associate Professor

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 566.65

Date of Receipt: 06 / 24 / 2025
Transaction ID : 0D2C776D-99C1-4E14-

Amount of Each Receipt this Period: 150.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Banek, Jennifer, L, ,

Mailing Address 1210 E Park Ave

City: Libertyville | State: IL | Zip Code: 60048-2955

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Optimum Anesthesia Solutions
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 970.00

Date of Receipt: 06 / 11 / 2025
Transaction ID : 4D1FAF369AA3FC668527

Amount of Each Receipt this Period: 120.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 353.33

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585116

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Banek, Jennifer, L, ,

Mailing Address 1210 E Park Ave

City: Libertyville | State: IL | Zip Code: 60048-2955

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Optimum Anesthesia Solutions
Occupation (for Individual): CRNA

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 970.00

Date of Receipt: 06 / 17 / 2025
Transaction ID : D44C8577618B4C42A52F

Amount of Each Receipt this Period: 500.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Banek, Jennifer, L, ,

Mailing Address 1210 E Park Ave

City: Libertyville | State: IL | Zip Code: 60048-2955

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Optimum Anesthesia Solutions
Occupation (for Individual): CRNA

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 970.00

Date of Receipt: 06 / 17 / 2025
Transaction ID : 433019EA53D74CE88C35

Amount of Each Receipt this Period: – 250.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Banek, Jennifer, L, ,

Mailing Address 1210 E Park Ave

City: Libertyville | State: IL | Zip Code: 60048-2955

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Optimum Anesthesia Solutions
Occupation (for Individual): CRNA

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼: 970.00

Date of Receipt: 06 / 17 / 2025
Transaction ID : AB677D6A6FB947DCB965

Amount of Each Receipt this Period: – 250.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585117

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 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)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Baray, Michael, Anthony, ,

Mailing Address 13381 Eton Pl

City: Santa Ana | State: CA | Zip Code: 92705-2117

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Sweet Dreams Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 22 / 2025
Transaction ID : 4B9EA5AA6570A0D9175E

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Barber, Debra, A, ,

Mailing Address 834 Inspiration Way

City: Louisville | State: KY | Zip Code: 40245-3989

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Triple Crown Anesthesia
Occupation (for Individual): Nurse anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1000.00

Date of Receipt: 06 / 30 / 2025
Transaction ID : 40C8AAD3147732493282

Amount of Each Receipt this Period: 125.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bartels, Christopher, K, ,

Mailing Address 16 Carriage Dr

City: Bethany | State: CT | Zip Code: 06524-3371

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Connecticut Anesthesia Professionals
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 06 / 24 / 2025
Transaction ID : 44D58BF65F5A21C4F928

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 475.00

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585118

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

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bassett, Ann, M, ,

Mailing Address 54 Woodlawn Rd

City: New London | State: CT | Zip Code: 06320-2935

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Northeast Medical Group- Yale New Have
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 875.01

Date of Receipt: 06 / 12 / 2025
Transaction ID : 45AE88A0682804BBD2F2

Amount of Each Receipt this Period: 125.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bauer, Daryl, R, ,

Mailing Address 4636 Windstar Way

City: Lexington | State: KY | Zip Code: 40515-4819

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Central Kentucky Anesthesia, PSC
Occupation (for Individual): Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 365.00

Date of Receipt: 06 / 25 / 2025
Transaction ID : DA8E5C35-963F-4DB2-

Amount of Each Receipt this Period: 365.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Beacham, Kera, Alysia, ,

Mailing Address 4940 Ballahack Rd

City: Chesapeake | State: VA | Zip Code: 23322-3254

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Atlantic anesthesia inc
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 27 / 2025
Transaction ID : 4F938A15FF4F47DD2D7A

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 590.00

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585119

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Beck, Courtney, B, ,

Mailing Address 1707 W Bijou St

City: Colorado Springs | State: CO | Zip Code: 80904-3549

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Courtney Beck PC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 282.46

Date of Receipt: 06 / 12 / 2025
Transaction ID : 43128E5A000F479D17AB

Amount of Each Receipt this Period: 30.41

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bender, Dee, A, ,

Mailing Address PO Box 562

City: Gold Bar | State: WA | Zip Code: 98251-0562

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Northwest University
Occupation (for Individual): Instructor

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 2249.98

Date of Receipt: 06 / 07 / 2025
Transaction ID : 482DB58499146DBDE3C5

Amount of Each Receipt this Period: 208.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Beninga, Paul, , ,

Mailing Address 6800 S Shadow Cir

City: Sioux Falls | State: SD | Zip Code: 57108-5842

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Avera McKennan Hospital
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 06 / 2025
Transaction ID : 4A889D56CDC1A9B349CE

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 338.74

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585120

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Beres, Kimberly, A, ,

Mailing Address 3644 Portsmouth Cir S

City: Stockton | State: CA | Zip Code: 95219-3846

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): UC Davis School of Medicine
Occupation (for Individual): Chief Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 25 / 2025
Transaction ID : 44F3A62691025CBCC125

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Berry, Dee, A, ,

Mailing Address 31199 M 152

City: Dowagiac | State: MI | Zip Code: 49047-9054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Corewell Health South
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.99

Date of Receipt: 06 / 24 / 2025
Transaction ID : 4A4C85F87BBBA9D5FB52

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Beyerlein, Robert, Alan, ,

Mailing Address 1427 Hazy Falls Blvd

City: Westfield | State: IN | Zip Code: 46074-7858

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Hancock Regional Hospital
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 23 / 2025
Transaction ID : 49C6954CD161AB47CC7A

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 266.66

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bias, Lee, A, ,
Mailing Address 56 Morris Ter
City: Culloden | State: WV | Zip Code: 25510-9050
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): TeamHealth Anesthesia
Occupation (for Individual): CRNA
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 2499.98
Date of Receipt: 06 / 24 / 2025
Transaction ID : 44679DD3A3F092A7BD9F
Amount of Each Receipt this Period: 208.33
☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Blake, Shawn, Charles, ,
Mailing Address 1001 Woodside Ct
City: Decorah | State: IA | Zip Code: 52101-2341
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): Reginal Health of Howard County
Occupation (for Individual): CRNA
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 499.98
Date of Receipt: 06 / 14 / 2025
Transaction ID : 43719BFD6F7A2ED9C311
Amount of Each Receipt this Period: 83.33
☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Blount, Jeremy, Paul, ,
Mailing Address 515 S Mangum St Apt 5140
City: Durham | State: NC | Zip Code: 27701-4389
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): UAB Medicine, LLC
Occupation (for Individual): CRNA
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date ▼: 499.98
Date of Receipt: 06 / 16 / 2025
Transaction ID : 48B1B51A6F69E8377FE5
Amount of Each Receipt this Period: 83.33
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 374.99

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585122

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bohannan, Holly, R, ,

Mailing Address 12688 Miller Church Rd

City: Bentonville | State: AR | Zip Code: 72712-9041

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Bohannan Anesthesia Services PLLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 27 / 2025
Transaction ID : 42BC8035915A0F1FB6E6

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Boles, Edgar, H, ,

Mailing Address 742 W Buena Ave
Apt 1E

City: Chicago | State: IL | Zip Code: 60613-0072

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): EHB3 Anesthesia LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 2559.98

Date of Receipt: 06 / 24 / 2025
Transaction ID : 46C986A6D9EE91C22569

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bolte, Jena, Michelle, ,

Mailing Address 280 Deer Creek Dr

City: Amelia | State: OH | Zip Code: 45102-2681

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Good Samaritan Hospital
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1262.46

Date of Receipt: 06 / 12 / 2025
Transaction ID : 47199D825BCE02111282

Amount of Each Receipt this Period: 208.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 374.99

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bolte, Jena, Michelle, ,

Mailing Address 280 Deer Creek Dr

City: Amelia | State: OH | Zip Code: 45102-2681

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Good Samaritan Hospital
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1262.46

Date of Receipt: 06 / 13 / 2025
Transaction ID : 4BE39F54021B25A59E0A

Amount of Each Receipt this Period: 2.08

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bonnema, Jacob, Alan, ,

Mailing Address 717 S Clark St
Apt 2104, Unit 2104

City: Chicago | State: IL | Zip Code: 60605-1815

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Vivant Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 2058.31

Date of Receipt: 06 / 15 / 2025
Transaction ID : 43EE8C1E0921F53F660D

Amount of Each Receipt this Period: 208.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bonnema, Jacob, Alan, ,

Mailing Address 717 S Clark St
Apt 2104, Unit 2104

City: Chicago | State: IL | Zip Code: 60605-1815

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Vivant Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 2058.31

Date of Receipt: 06 / 19 / 2025
Transaction ID : 415487EE69F56F20CFFC

Amount of Each Receipt this Period: 208.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.74

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585124

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bonnema, Jacob, Alan, ,

Mailing Address 717 S Clark St
Apt 2104, Unit 2104

City: Chicago | State: IL | Zip Code: 60605-1815

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Vivant Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 2058.31

Date of Receipt: 06 / 26 / 2025
Transaction ID : 1B85BD06-16C8-4F66-

Amount of Each Receipt this Period: 150.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Borbely, Heather, M, ,

Mailing Address 267 Riverside Dr N

City: Brick | State: NJ | Zip Code: 08724-1807

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): RWJBH Monmouth
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1559.98

Date of Receipt: 06 / 04 / 2025
Transaction ID : 4094B92B5664ED34D177

Amount of Each Receipt this Period: 208.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Boswell, Nicole, B, ,

Mailing Address 900 SW Finch Way

City: Pullman | State: WA | Zip Code: 99163-5827

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): TNUOC.PLLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 18 / 2025
Transaction ID : 4B6D960FA59A12322577

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 441.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585125

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bourgeois, Christian, , ,

Mailing Address 35 Winthrop Dr

City: Cortlandt Manor | State: NY | Zip Code: 10567-1434

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): New York Presbyterian - Allen Spine Ho
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 11 / 2025
Transaction ID : 475A8487638188CC9401

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bourgeois, Robert, Scott, ,

Mailing Address 7707 New Forest Ln

City: Sugar Land | State: TX | Zip Code: 77479-4857

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): H3 Anesthesia, PLLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 20 / 2025
Transaction ID : 4F22A77F1139AB1D9102

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bourget, Christopher, Daniel, ,

Mailing Address 506 N R and R Dr

City: Okawville | State: IL | Zip Code: 62271-2155

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Aasi
Occupation (for Individual): Crna

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 249.96

Date of Receipt: 06 / 30 / 2025
Transaction ID : 4EA59B7118EC6E75A5A2

Amount of Each Receipt this Period: 41.66

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 224.99

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585126

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bowers, Nicolas, Richard, ,

Mailing Address 1679 Prairiewood Ct

City: Otsego | State: MI | Zip Code: 49078-9321

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Trinity Health Grand Rapids
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 15 / 2025
Transaction ID : 42188BDB733C97531BDE

Amount of Each Receipt this Period: 50.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bowersox, Monique, R, ,

Mailing Address 3051 Avalon Cove Ct NW

City: Rochester | State: MN | Zip Code: 55901-8497

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Mayo Clinic
Occupation (for Individual): Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 17 / 2025
Transaction ID : 44C3B6FF2CE3EE2D4B14

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Box, Ian, , ,

Mailing Address 13 Sunview Ter

City: S Dartmouth | State: MA | Zip Code: 02748-3112

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Brigham and women's hospital
Occupation (for Individual): Crna

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 07 / 2025
Transaction ID : 4A5FA043F0CEBF6122E9

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 216.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585127

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Branch, Myra, Kellam, ,

Mailing Address 725 Old Hunt Way

City: Herndon | State: VA | Zip Code: 20170-3158

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NorthStar Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 432.46

Date of Receipt: 06 / 01 / 2025
Transaction ID : 434D9F0F4289FB0F3CD7

Amount of Each Receipt this Period: 30.41

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Brogdon, Stephanie, , ,

Mailing Address 1123 Bradburn Dr

City: Durham | State: NC | Zip Code: 27713-6905

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of North Carolina Chapel Hi
Occupation (for Individual): Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 10 / 2025
Transaction ID : 4E2EB1E7FC01344A1E99

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Brown, Kalah, Jean, ,

Mailing Address 1010 NE 45th St

City: Ocala | State: FL | Zip Code: 34479-1902

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Weatherby
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 625.00

Date of Receipt: 06 / 18 / 2025
Transaction ID : 4F17AD4C38600669BB5C

Amount of Each Receipt this Period: 625.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 755.41

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Image# 202507179763585128

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bruns, Michael, L, ,
Mailing Address 70 Belleair Rd
City: Asheville | State: NC | Zip Code: 28806-3104
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): Apex Anesthesia Solutions P.C.
Occupation (for Individual): CRNA
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 499.98
Date of Receipt: 06 / 17 / 2025
Transaction ID : 44A9AF2B06D8A915F867
Amount of Each Receipt this Period: 83.33
☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bryant, Carolyn, A, ,
Mailing Address 14101 Castlerock Dr
City: Orlando | State: FL | Zip Code: 32828-8225
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): Nemours Children's Hospital
Occupation (for Individual): Certified Registered Nurse Anesthetist
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 499.98
Date of Receipt: 06 / 12 / 2025
Transaction ID : 4DB59478128F1441DBC6
Amount of Each Receipt this Period: 83.33
☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Burke, Cherie, Anne, ,
Mailing Address 25 High St
Unit 504
City: Portland | State: ME | Zip Code: 04101-5193
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): Self Employed
Occupation (for Individual): CRNA
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date ▼: 499.98
Date of Receipt: 06 / 24 / 2025
Transaction ID : 46C1B9C9942F9A5DEE55
Amount of Each Receipt this Period: 83.33
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 249.99

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585129

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Burnett-Olsen, Deborah, A, ,

Mailing Address 314 Ivy Ln

City: Glen Mills | State: PA | Zip Code: 19342-1322

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Premier Anesthesia and Cedar Crest Col
Occupation (for Individual): CRNA and Assistant Professor

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt: 06 / 25 / 2025
Transaction ID : 45F2A75C9794FA13B7EF

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cahoon, Terri, M, ,

Mailing Address 920 Vestlake Hollow Cir

City: Vestavia | State: AL | Zip Code: 35242-7513

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Samford University
Occupation (for Individual): Professor

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 249.96

Date of Receipt: 06 / 27 / 2025
Transaction ID : 4144B05D2F18B2E57717

Amount of Each Receipt this Period: 41.66

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Calbert, Desiree, Lynn, ,

Mailing Address 15360 Highway Z

City: Falcon | State: MO | Zip Code: 65470-8125

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Mercy Hospital
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 16 / 2025
Transaction ID : 4B7DAE494A7C443681D0

Amount of Each Receipt this Period: 50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 174.99

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585130

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Camp, Kelli, E, ,

Mailing Address 1305 E Olympia St

City: Othello | State: WA | Zip Code: 99344-1261

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Othello Community Hospital
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 249.98

Date of Receipt: 06 / 28 / 2025
Transaction ID : 4BFE8976BC6854199530

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Campbell, Crystal, Nicole, ,

Mailing Address 8318 Willow Beach Dr

City: Riverview | State: FL | Zip Code: 33578-4113

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of California Davis, Betty
Occupation (for Individual): CRNA, Health Sciences Assistant Profe

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 682.45

Date of Receipt: 06 / 19 / 2025
Transaction ID : 4F6188BB5AE8C8D5D4AE

Amount of Each Receipt this Period: 30.41

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Campbell, Crystal, Nicole, ,

Mailing Address 8318 Willow Beach Dr

City: Riverview | State: FL | Zip Code: 33578-4113

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of California Davis, Betty
Occupation (for Individual): CRNA, Health Sciences Assistant Profes

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 682.45

Date of Receipt: 06 / 28 / 2025
Transaction ID : 4B4DB8EF5FFC7AC67732

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 197.07

TOTAL This Period (last page this line number only) ▶

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Campbell, Jerold, Benjamin, ,

Mailing Address 200 Briarpatch Ct

City: Mountain Pine | State: AR | Zip Code: 71956-9721

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Anesthesia Specialists, P.A.
Occupation (for Individual): Nurse Anesthesiologist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 365.00

Date of Receipt: 06 / 05 / 2025
Transaction ID : E55FB6DD-6BF4-4E9F-

Amount of Each Receipt this Period: 365.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Canale, Michelle, Leah, ,

Mailing Address 1918 Racimo Dr

City: Sarasota | State: FL | Zip Code: 34240-9483

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of South Florida
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1239.99

Date of Receipt: 06 / 25 / 2025
Transaction ID : 4073A8FE0B9DA356F809

Amount of Each Receipt this Period: 208.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cappello, Mark, T, ,

Mailing Address 1511 W Ardmore Ave
Apt 1

City: Chicago | State: IL | Zip Code: 60660-4289

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 17 / 2025
Transaction ID : 48469F6D827E5ED47604

Amount of Each Receipt this Period: 50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 623.33

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585132

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cardinal, Kevin, J, ,

Mailing Address 1426 N Innsbruck Dr

City: Fridley | State: MN | Zip Code: 55432-5920

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): M Health - Fairview
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1520.00

Date of Receipt: 06 / 24 / 2025
Transaction ID : 738672CF-A753-43B9-

Amount of Each Receipt this Period: 600.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Carnahan, Thomas, Dorrington, , IV

Mailing Address 215 Lakeview Dr

City: Collingswood | State: NJ | Zip Code: 08108-3026

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Sandman Slumber Services, LLC
Occupation (for Individual): Owner, CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 932.46

Date of Receipt: 06 / 12 / 2025
Transaction ID : 439D9FB0C4E84F9A7D10

Amount of Each Receipt this Period: 30.41

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Carr, Joshua, A, ,

Mailing Address 5622 Chincoteague Ct

City: Oceanside | State: CA | Zip Code: 92057-5548

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): self
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 4425.00

Date of Receipt: 06 / 16 / 2025
Transaction ID : 491B9E4A9A49F240466E

Amount of Each Receipt this Period: 50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 680.41

TOTAL This Period (last page this line number only) ▶

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Carter, Donnell, , ,

Mailing Address 816 E Carroll St

City: Herrin | State: IL | Zip Code: 62948-3053

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Harvard Medical Faculty Physicians
Occupation (for Individual): Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 10 / 2025
Transaction ID : 4D129DEEF9C6130067C6

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cary, Jamie, B, ,

Mailing Address 507 Rogers Ave

City: Greenville | State: KY | Zip Code: 42345-1133

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NorthStar Anesthesia Services.
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 2500.00

Date of Receipt: 06 / 18 / 2025
Transaction ID : F871324D-8284-41D2-

Amount of Each Receipt this Period: 2500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Castillo, Jeffrey, , ,

Mailing Address 4210 W Landberg Ave

City: Las Vegas | State: NV | Zip Code: 89141-8948

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): USAP
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 20 / 2025
Transaction ID : 4A05AB9741DC0110B6C7

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2683.33

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585134

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Castleman, Tracy, E, ,

Mailing Address 144 Coachman Dr N

City: Freehold | State: NJ | Zip Code: 07728-3153

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): RWJBH
Occupation (for Individual): Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1374.99

Date of Receipt: 06 / 08 / 2025
Transaction ID : 4360BFD44F81B1EABFAC

Amount of Each Receipt this Period: 208.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Caswell, Abigail, Leigh, ,

Mailing Address 324 Old Course Dr

City: Friendswood | State: TX | Zip Code: 77546-5637

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Baylor College of Medicine
Occupation (for Individual): Faculty CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 06 / 17 / 2025
Transaction ID : 4AA881BCD31AD97C4F9B

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Chandler, Holly, A, ,

Mailing Address 7102 N 151st Ave

City: Bennington | State: NE | Zip Code: 68007-1427

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Creighton University
Occupation (for Individual): Program Director

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 341.23

Date of Receipt: 06 / 18 / 2025
Transaction ID : 46019E772B1891AA3F18

Amount of Each Receipt this Period: 30.41

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 488.74

TOTAL This Period (last page this line number only) ▶

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Chang, Jake, C, ,

Mailing Address 3022 Andres Ct

City: Floyds Knobs | State: IN | Zip Code: 47119-0015

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): The Gas Factory LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 25 / 2025
Transaction ID : 4BADBC2B6155631D54C7

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Chiapusio, Ronald, J, ,

Mailing Address 6426 Crosswoods Dr

City: Falls Church | State: VA | Zip Code: 22044-1214

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Crna
Occupation (for Individual): Crna

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 208.33

Date of Receipt: 06 / 17 / 2025
Transaction ID : 4F52BABFB1B22341A2C9

Amount of Each Receipt this Period: 208.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Clark, Denise, Ann, ,

Mailing Address 10224 Berkeley Pond Dr

City: Charlotte | State: NC | Zip Code: 28277-8665

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Wake Forest Baptist Health
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 20 / 2025
Transaction ID : 41D6A012C0E34C1758F1

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 374.99

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585136

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Clevenger, Jennifer, Lynn, ,

Mailing Address 6280 Route 166

City: Creal Springs | State: IL | Zip Code: 62922-3317

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): RIP Van Winkle Group, LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 698.32

Date of Receipt: 06 / 01 / 2025
Transaction ID : 491F97B04CEB880289E3

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cogan, Michael, P, ,

Mailing Address 3 Beverly Ct

City: Northport | State: NY | Zip Code: 11768-1426

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Stony Brook University Hospital
Occupation (for Individual): Staff CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt: 06 / 24 / 2025
Transaction ID : A0B1F783-40CA-4AAC-

Amount of Each Receipt this Period: 150.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Coker, Kyle, Bryce, ,

Mailing Address 1018 Windsong Way

City: Louisville | State: KY | Zip Code: 40207-2272

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Eastex Anesthesia PLLC
Occupation (for Individual): Locum CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 220.82

Date of Receipt: 06 / 29 / 2025
Transaction ID : 49CA8272BD04EC950735

Amount of Each Receipt this Period: 40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 273.33

TOTAL This Period (last page this line number only) ▶

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cook, April, D, ,

Mailing Address 1044 267th St

City: Nashua | State: IA | Zip Code: 50658-9439

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self employed
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt: 06 / 30 / 2025
Transaction ID : 4D8599822C7CD068E69A

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cooley-Debolt, Brandy, L, ,

Mailing Address 8517 Moravian Trail Rd SE

City: Uhrichsville | State: OH | Zip Code: 44683-7401

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Northstar anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 06 / 25 / 2025
Transaction ID : 4323A0DD08821F44CA04

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cornelius, Randy, D, ,

Mailing Address 4913 Harvest Ct SW

City: Cedar Rapids | State: IA | Zip Code: 52404-7411

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): RDC Anesthesia Services LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 529.98

Date of Receipt: 06 / 07 / 2025
Transaction ID : 428C8BE0C4D317EDECD6

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 266.66

TOTAL This Period (last page this line number only) ▶

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Corriveau, Luc, George, ,

Mailing Address 7 Mount Carter Dr

City: Gorham | State: NH | Zip Code: 03581-1317

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Androscoggin Valley Hospital
Occupation (for Individual): Chief CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 28 / 2025

Transaction ID : 4700BC9AECBDE9FAE805

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cotton, Gram, M, ,

Mailing Address 17715 120th Ave

City: Chippewa Falls | State: WI | Zip Code: 54729-6138

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): GMC Anesthesia, Inc.
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1320.00

Date of Receipt: 06 / 05 / 2025

Transaction ID : 463F9D8EC29BB7421E24

Amount of Each Receipt this Period: 220.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cottrill, Kristen, Nichole, ,

Mailing Address 1891 Clay Dr

City: Crozet | State: VA | Zip Code: 22932-2880

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of Virginia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 28 / 2025

Transaction ID : 42E9BF6D60B2EDCC4F67

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 403.33

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585139

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Crawford, Gregory, M, ,

Mailing Address 104 Fahey Ct

City: Folsom | State: CA | Zip Code: 95630-8049

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): KAISER PERMANENTE
Occupation (for Individual): Declined

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 249.96

Date of Receipt: 06 / 22 / 2025
Transaction ID : 4CC29652A4E8C33E717C

Amount of Each Receipt this Period: 41.66

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Crocker, Jared, , ,

Mailing Address 119 John Austin Ln

City: Mt Washington | State: KY | Zip Code: 40047-6349

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Lake Daze Anesthesia, PLLC
Occupation (for Individual): Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1749.98

Date of Receipt: 06 / 21 / 2025
Transaction ID : 4442AE75B40F0942ED0B

Amount of Each Receipt this Period: 208.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cross, Lori, M, ,

Mailing Address 12151 Irwin Manor Dr

City: Jacksonville | State: FL | Zip Code: 32246-5103

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): UF Health
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 06 / 2025
Transaction ID : 46DEA88ECC5636FB0772

Amount of Each Receipt this Period: 50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 299.99

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585140

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Crossette, Melissa, L, ,

Mailing Address 1013 SW Argyl St

City: Lees Summit | State: MO | Zip Code: 64081-7809

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Golden Valley Memorial Healthcare
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 212.87

Date of Receipt: 06 / 21 / 2025
Transaction ID : 43B8B30CAFB609375D88

Amount of Each Receipt this Period: 30.41

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DAgostino, Mary, , ,

Mailing Address 36 Robins Rd

City: Garnet Valley | State: PA | Zip Code: 19060-1915

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NCB Anesthesia
Occupation (for Individual): Crna

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 12 / 2025
Transaction ID : 4F97A0A8F5460DB0BF11

Amount of Each Receipt this Period: 50.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Damery, Michelle, Lynne, ,

Mailing Address 231 Bandon Dr

City: New Bern | State: NC | Zip Code: 28562-2303

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CarolinaEast Health System
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 14 / 2025
Transaction ID : 48B49C23E57124E0CF81

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 163.74

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585141

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Damico, Nickie, K, ,

Mailing Address 2011 Winterfield Rd

City: Midlothian | State: VA | Zip Code: 23113-4164

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Virginia Commonwealth University
Occupation (for Individual): Chair, Department of Nurse Anesthesia

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 06 / 27 / 2025
Transaction ID : 4BD097213E637DDF186C

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Daoud, Danielle, , ,

Mailing Address 5535 S Newcastle Ave

City: Chicago | State: IL | Zip Code: 60638-2313

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Livingood Anesthetics
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 06 / 23 / 2025
Transaction ID : 407CA5796624D1FEED4E

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Davis, Ashley, Poe, ,

Mailing Address 1992 Cooks Valley Rd

City: Kingsport | State: TN | Zip Code: 37664-5117

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Advanced Anesthesia Solutions
Occupation (for Individual): Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 499.98

Date of Receipt: 06 / 13 / 2025
Transaction ID : 42C994B66A8E9955752A

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 433.33

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585142

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Davis, Joshua, , ,

Mailing Address 6135 Cottage Grove Lake Dr

City: Houston | State: TX | Zip Code: 77007-2967

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): UT Health Science Center Houston
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 05 / 2025
Transaction ID : 41E886384C169A532D54

Amount of Each Receipt this Period: 50.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Davis, Nathan, M, ,

Mailing Address 1992 Cooks Valley Rd

City: Kingsport | State: TN | Zip Code: 37664-5117

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Advanced Anesthesia Solutions
Occupation (for Individual): Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 249.96

Date of Receipt: 06 / 14 / 2025
Transaction ID : 40BF8091D7D0DF3F959A

Amount of Each Receipt this Period: 41.66

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Davis, Rachel, C, ,

Mailing Address 6260 Chevy Chase Dr

City: Houston | State: TX | Zip Code: 77057-3516

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Baylor College of Medicine
Occupation (for Individual): Certified Registered Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 499.98

Date of Receipt: 06 / 13 / 2025
Transaction ID : 41179A358E3A92463043

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 174.99

TOTAL This Period (last page this line number only) ▶

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Davis, Thomas, Corey, ,

Mailing Address 9101 Olde Hartley Dr

City: Glen Allen | State: VA | Zip Code: 23060-6367

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): VCUHealth
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 22 / 2025
Transaction ID : 424AAE0391B82F993228

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Deeter, Kellie, L, ,

Mailing Address 1171 Pioneer Pass

City: Norwalk | State: OH | Zip Code: 44857-8928

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Firelands Anesthesia
Occupation (for Individual): Owner

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 833.33

Date of Receipt: 06 / 07 / 2025
Transaction ID : 4B718136C3A7BC27D324

Amount of Each Receipt this Period: 208.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DeVito, Catherine, F, ,

Mailing Address 1936 Michigan Ave NE

City: St Petersburg | State: FL | Zip Code: 33703-3406

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Envision
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 03 / 2025
Transaction ID : 4975831D69FEB43CA9AC

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 391.66

TOTAL This Period (last page this line number only) ▶

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Diaz, Debra, Jeanne, ,

Mailing Address 15 Cumberland Ave

City: Ormond Beach | State: FL | Zip Code: 32174-5323

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): South College
Occupation (for Individual): Assistant Professor

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1999.98

Date of Receipt: 06 / 01 / 2025
Transaction ID : 4A4E8955E6CAD549FB83

Amount of Each Receipt this Period: 208.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Diaz, Mayte, , ,

Mailing Address 8628 Sandy Plains Dr

City: Riverview | State: FL | Zip Code: 33578-8616

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of South Florida
Occupation (for Individual): Assistant Professor

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 899.98

Date of Receipt: 06 / 14 / 2025
Transaction ID : 43CCB7F3FDE97FEFF4FE

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Diaz, Mayte, , ,

Mailing Address 8628 Sandy Plains Dr

City: Riverview | State: FL | Zip Code: 33578-8616

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of South Florida
Occupation (for Individual): Assistant Professor

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 899.98

Date of Receipt: 06 / 24 / 2025
Transaction ID : 147FF017-672E-43A3-

Amount of Each Receipt this Period: 150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 441.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585145

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Diggs, Thomas, L, ,

Mailing Address 83 Willie Mayes Ct

City: Berkeley Springs | State: WV | Zip Code: 25411-6975

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Anesta Anesthesia Services, LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 27 / 2025
Transaction ID : 466EA476897B5B8397A8

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Dillman, Jedd, , ,

Mailing Address 301 Cookman Ave
Unit 6

City: Asbury Park | State: NJ | Zip Code: 07712-7801

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NAPA
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 22 / 2025
Transaction ID : 400FAC85CCF5578D29D0

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Dolan, Kevin, B, ,

Mailing Address 162 Budd Ave

City: Campbell | State: CA | Zip Code: 95008-4004

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): The Permanente Medical Group
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 02 / 2025
Transaction ID : 4F6680ED8E8ACFC2EFC0

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 249.99

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585146

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Donnell, Jacob, , ,

Mailing Address 11 Starlight Dr

City: Hooksett | State: NH | Zip Code: 03106-2445

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self employed
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 12 / 2025
Transaction ID : 46FF97FD7AF831AEE231

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Dores, Tina, M, ,

Mailing Address 48 Finca Loop

City: Laredo | State: TX | Zip Code: 78045-3405

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Sindores Anesthesia Services Inc
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 12 / 2025
Transaction ID : 45429A621E5B62B1F94D

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Dupree, Garrett, Austen, ,

Mailing Address 5709 Pope Creek Rd

City: Fort Worth | State: TX | Zip Code: 76126-2042

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): John Peter Smith - Sound Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 249.96

Date of Receipt: 06 / 17 / 2025
Transaction ID : 4ECB87D0DF1BE29B61EB

Amount of Each Receipt this Period: 41.66

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 224.99

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585147

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Dwyer, Maura, A, ,

Mailing Address 160 Pine St

City: Danvers | State: MA | Zip Code: 01923-2642

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Dwyer Anesthesia LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 12 / 2025
Transaction ID : 40E69C8B9D604C0B8D4F

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Eads, Victoria, Leigh, ,

Mailing Address 1480 Concord Pkwy N 1168, Ste 350

City: Concord | State: NC | Zip Code: 28025-0121

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 375.00

Date of Receipt: 06 / 16 / 2025
Transaction ID : 4E0EB77A07BCA4F996B2

Amount of Each Receipt this Period: 62.50

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Eisenhawer, Ingrid, , ,

Mailing Address 8820 W Libby Rd

City: Groveland | State: FL | Zip Code: 34736-8614

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): 4PlanesAnesthesiaServices, LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 833.32

Date of Receipt: 06 / 19 / 2025
Transaction ID : 48839FA296FD1D6EA7EC

Amount of Each Receipt this Period: 208.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 354.16

TOTAL This Period (last page this line number only) ▶

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Elam, Charles, Reginald, , IV

Mailing Address 9021 N Jessy Ln

City: Tucson | State: AZ | Zip Code: 85742-8642

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 12 / 2025
Transaction ID : 4441BF1A0B4125ECC134

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ellis, Dorie, Christine, ,

Mailing Address 11717 Robert E Lee Dr

City: Bristow | State: VA | Zip Code: 20136-1381

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Mednax
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 06 / 16 / 2025
Transaction ID : 4C809610A8AD1FA53967

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Elsea, Collin, Richard, ,

Mailing Address 5570 SW Dover Ln

City: Portland | State: OR | Zip Code: 97225-1029

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Anesthesia Associate NW/Providence Mil
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 07 / 2025
Transaction ID : 4D3D92DCD8B146C48110

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 266.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585149

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Engelbrecht, Christine, Ballard, ,

Mailing Address 160 La Bolsa Rd

City: Walnut Creek | State: CA | Zip Code: 94598-4817

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 06 / 25 / 2025
Transaction ID : 0F94EC8258B84331A7BF

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Engelman, Megan, , ,

Mailing Address 6358 Juliet Dr

City: Avon | State: IN | Zip Code: 46123-8107

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Hendricks Regional Health
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 249.96

Date of Receipt: 06 / 28 / 2025
Transaction ID : 467D878BF20C651E0FA5

Amount of Each Receipt this Period: 41.66

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Erickson, April, Lynne, ,

Mailing Address 7362 W Parks Hwy Unit 811

City: Wasilla | State: AK | Zip Code: 99623-9300

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 01 / 2025
Transaction ID : 4A0DBE37FA60B75D6810

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 624.99

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585150

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Everette, Robbyn, Holbrook, ,

Mailing Address 206 W Bassett Rd

City: Shelbyville | State: IN | Zip Code: 46176-9475

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Community Health Network
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 06 / 26 / 2025
Transaction ID : 48948059E2C888AF5ABD

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Everson, Marjorie, Geisz, ,

Mailing Address 127 Richards Ln

City: Great Falls | State: MT | Zip Code: 59404-6482

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Johns Hopkins University
Occupation (for Individual): CRNA Educator

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 999.98

Date of Receipt: 06 / 13 / 2025
Transaction ID : 41F6B627A469033F957C

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Everts, Katheryn, E, ,

Mailing Address 5822 Nelson Dr

City: Hudsonville | State: MI | Zip Code: 49426-7579

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Everts Anesthesia Staffing
Occupation (for Individual): Independent CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 06 / 11 / 2025
Transaction ID : 4CC7A0C43DF377CB67CF

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 433.33

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585151

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Eye, Tiffany, B, ,

Mailing Address 1606 Hermitage Pl

City: Murray | State: KY | Zip Code: 42071-3110

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Murray State Univeristy
Occupation (for Individual): Program Administrator, Assistant Profe

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 250.00

Date of Receipt: 06 / 28 / 2025
Transaction ID : 48519A3088CD4FF95101

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fabich, Robert, Andrew, , Jr

Mailing Address 67 Greenbriar Rd

City: Keene | State: NH | Zip Code: 03431-2848

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Medstream
Occupation (for Individual): Chief CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 2549.98

Date of Receipt: 06 / 06 / 2025
Transaction ID : 145E038D-49E4-4D5E-

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fabich, Robert, Andrew, , Jr

Mailing Address 67 Greenbriar Rd

City: Keene | State: NH | Zip Code: 03431-2848

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Medstream
Occupation (for Individual): Chief CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 2549.98

Date of Receipt: 06 / 07 / 2025
Transaction ID : 434FBAD50E11F8B59368

Amount of Each Receipt this Period: 208.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1458.33

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585152

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Faia, Claire, , ,

Mailing Address 10727 Country Wood Trl

City: Fort Wayne | State: IN | Zip Code: 46845-1061

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Midwest Anesthesia Associates
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt: 06 / 13 / 2025
Transaction ID : 4EE28CA023F26B10AC58

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fain, Adriane, , ,

Mailing Address 130 Jacobs Rd

City: Coupeville | State: WA | Zip Code: 98239-9552

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): AANW
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt: 06 / 10 / 2025
Transaction ID : 4D4A9ACE080D4EAE915A

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Farmer, Daniel, J, ,

Mailing Address 421 Meadow Brook Ter

City: Hartsville | State: SC | Zip Code: 29550-4600

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Independent
Occupation (for Individual): Crna

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 499.98

Date of Receipt: 06 / 21 / 2025
Transaction ID : 4BF58E4B555B92160240

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 249.99

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585153

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ferguson, Blaire, M, ,

Mailing Address 1846 Walnut Grove Rd

City: Clarksville | State: TN | Zip Code: 37042-3847

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Defense Health Agency
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 30 / 2025
Transaction ID : 40A194F0E13CDB42071C

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fernandez De Soto, Lindsey, , ,

Mailing Address 1298 Hartford Tpke
Apt 11D

City: North Haven | State: CT | Zip Code: 06473-6100

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): FDS Dream Machine Inc.
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1320.00

Date of Receipt: 06 / 16 / 2025
Transaction ID : 470CBE07D7EED2EF7206

Amount of Each Receipt this Period: 220.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fernandez De Soto, Sebastian, , ,

Mailing Address 1298 Hartford Tpke
Apt 11D

City: North Haven | State: CT | Zip Code: 06473-6100

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): FDS Dream Machine Inc.
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1320.00

Date of Receipt: 06 / 16 / 2025
Transaction ID : 4A8F879004CA9B0A328E

Amount of Each Receipt this Period: 220.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 523.33

TOTAL This Period (last page this line number only) ▶

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Finder, Stephen, Trent, ,

Mailing Address 4789 Ross Hollow Ln

City: Bartlett | State: TN | Zip Code: 38002-8781

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): LifeLinc Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1344.98

Date of Receipt: 06 / 03 / 2025
Transaction ID : 4A0694FD2DBA43B36F56

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fisher, Marquessa, D, ,

Mailing Address 248 Aldeburgh Ave
8639913607

City: Spring Hill | State: TN | Zip Code: 37174-3369

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Flint Hills Pain Management
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1249.98

Date of Receipt: 06 / 24 / 2025
Transaction ID : 45FCBD481D1B02888C59

Amount of Each Receipt this Period: 208.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fleming, Randy, Gordon Scott, ,

Mailing Address 2006 E 33rd Ave

City: Spokane | State: WA | Zip Code: 99203-3952

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): RGS Anesthesia PLLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 07 / 2025
Transaction ID : 452987EBFC1E2ED5E9D9

Amount of Each Receipt this Period: 50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 341.66

TOTAL This Period (last page this line number only) ▶

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Flores, Ma. Romina, Sinamban, ,

Mailing Address 9625 Fannin Sta W

City: Houston | State: TX | Zip Code: 77045-4652

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): US Anesthesia Partners
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 28 / 2025

Transaction ID : 4B7D980411890CA3E2E0

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Folayan, Adeola, O, ,

Mailing Address 407 Everlee Ln

City: Mount Juliet | State: TN | Zip Code: 37122-4451

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Penuel Healthcare
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 13 / 2025

Transaction ID : 4C97B8A231E101227ED1

Amount of Each Receipt this Period: 50.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Foley, Erin, M, ,

Mailing Address 33 Park St
Apt 5

City: Portland | State: ME | Zip Code: 04101-4568

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Foley Anesthesia, PLLC
Occupation (for Individual): Owner/CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1099.98

Date of Receipt: 06 / 25 / 2025

Transaction ID : 4E3B8604066871E2D1AF

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 216.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585156

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Frazier, Franklin, R, ,

Mailing Address 5501 Copper Crk

City: Floyds Knobs | State: IN | Zip Code: 47119-9259

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Appalachian Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1000.00

Date of Receipt: 06 / 18 / 2025
Transaction ID : A76576CB-8D30-47D4-

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fredriksson, Sarah, Emily, ,

Mailing Address 505 Beechwood St

City: Cohasset | State: MA | Zip Code: 02025-1528

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Vigilance Anesthesia Services
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1249.98

Date of Receipt: 06 / 26 / 2025
Transaction ID : 4E6B8A21440411E6B161

Amount of Each Receipt this Period: 208.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Garzarek, Belinda, Sharpe, ,

Mailing Address 2954 County Road 55

City: Newton | State: AL | Zip Code: 36352-7306

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Dothan anesthesiology associates
Occupation (for Individual): Crna

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 02 / 2025
Transaction ID : 4286AC8A6030AF5D1837

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1291.66

TOTAL This Period (last page this line number only) ▶

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gauderman, Julie, C, ,

Mailing Address 8416 Shadow Creek Dr

City: Maple Grove | State: MN | Zip Code: 55311-1569

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Saint Mary's University of Minnesota
Occupation (for Individual): CRNA-Associate Program Director

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 799.98

Date of Receipt: 06 / 08 / 2025
Transaction ID : 440AB48277A11BD0B72F

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gerike, Laoma, , ,

Mailing Address 710 Panorama Rd

City: Villanova | State: PA | Zip Code: 19085-2030

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): TJUH
Occupation (for Individual): Crna

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.32

Date of Receipt: 06 / 29 / 2025
Transaction ID : 4700BB6EB36DEC786C0F

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gianitsis, John, Andrew, , II

Mailing Address 2920 Linden St

City: Oakland | State: CA | Zip Code: 94608-4521

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Kaiser Permanente
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 21 / 2025
Transaction ID : 478DB327DA2CB64147F1

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 249.99

TOTAL This Period (last page this line number only) ▶

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gingles, Hannah, K, ,

Mailing Address 3928 N 87th Pl

City: Scottsdale | State: AZ | Zip Code: 85251-5038

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Gingles Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 02 / 2025
Transaction ID : 478B87E8BE84E48484D6

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Glenn, Christopher, Todd, ,

Mailing Address 1749 N Wells St Apt 204

City: Chicago | State: IL | Zip Code: 60614-5821

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of Illinois
Occupation (for Individual): Nurse anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 06 / 2025
Transaction ID : 42ADA1A86846F08B82E3

Amount of Each Receipt this Period: 50.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gloe, Leslie, R, ,

Mailing Address 374 Fox Trail Rd

City: Walnut Shade | State: MO | Zip Code: 65771-9351

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Leslie R. GLoe, LLC
Occupation (for Individual): Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 29 / 2025
Transaction ID : 4687A0E904D9229B12DE

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 216.66

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Glover, Nicholas, , ,

Mailing Address 8504 Langtree Ln

City: Raleigh | State: NC | Zip Code: 27613-1331

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Glover Anesthesia Services, Pllc.
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 549.96

Date of Receipt: 06 / 15 / 2025
Transaction ID : 41798E109F2E21B985AD

Amount of Each Receipt this Period: 91.66

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Glybin, Natalie, , ,

Mailing Address 185 Pine St
Apt 512

City: Manchester | State: CT | Zip Code: 06040-5880

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Backus Hospital
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 04 / 2025
Transaction ID : 40E584C1CBFB46A1277A

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gonzalez, Michelle, L R, ,

Mailing Address 1423 Quail Ridge Dr

City: Alexander | State: AR | Zip Code: 72002-8592

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of Arkansas for Medical Sci
Occupation (for Individual): Director, DNP Nurse Anesthesia Progra

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1006.04

Date of Receipt: 06 / 13 / 2025
Transaction ID : 4B7296C68C010A740E1C

Amount of Each Receipt this Period: 84.34

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 276.00

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585160

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Goodell, Caitlyn, , ,

Mailing Address 4725 Matterhorn Cir
Apt 110, Apt 110

City: Duluth | State: MN | Zip Code: 55811-4423

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Essentia Health
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1249.98

Date of Receipt: 06 / 17 / 2025
Transaction ID : 44C59231D3CBEE6B52EE

Amount of Each Receipt this Period: 208.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Goodwin, Howard, O, ,

Mailing Address 15309 Creek Point Ln

City: Carrollton | State: VA | Zip Code: 23314-2027

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Old Dominion University
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 2249.98

Date of Receipt: 06 / 29 / 2025
Transaction ID : 4FF1A076040CD5FA549D

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Greco, Michael, , ,

Mailing Address 350 W 50th St
Apt 18H

City: New York | State: NY | Zip Code: 10019-6674

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): MEMORIAL SLOAN KETTERING CANCER CENTER
Occupation (for Individual): Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 999.98

Date of Receipt: 06 / 25 / 2025
Transaction ID : 499E9BA0B514799D6E39

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 374.99

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585161

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Grgurich, Tara, M, ,

Mailing Address 1104 N Baltimore St

City: Kirksville | State: MO | Zip Code: 63501-2528

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): MU
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 24 / 2025
Transaction ID : 47F08C66D15B28DB9DAE

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Griffis, Charles, A, ,

Mailing Address 1237 Carmona Ave

City: Los Angeles | State: CA | Zip Code: 90019-2531

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): USC Program of Nurse Anesthesia
Occupation (for Individual): Didactic Instructor

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 06 / 25 / 2025
Transaction ID : FF0E1A69D4AF49A88238

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Guadamuz, Lilian, N, ,

Mailing Address 28115 Copperleaf

City: Boerne | State: TX | Zip Code: 78015-6533

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): USAP
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 249.99

Date of Receipt: 06 / 27 / 2025
Transaction ID : 45318F5D866CBFD4DB44

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 666.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585162

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gurske, William, , ,

Mailing Address 412 Michelle Ln

City: Cottage Grove | State: WI | Zip Code: 53527-8969

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Edgerton Hospital
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 04 / 2025
Transaction ID : 4937A6F0C03A10ECE157

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gutshall, Catherine, G, ,

Mailing Address 236 Berwick Rd

City: Columbia | State: SC | Zip Code: 29212-1973

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of South Carolina
Occupation (for Individual): CRNA/Faculty

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 02 / 2025
Transaction ID : 40D1A4B1F13C0A119F33

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Haffey, Mark, J, ,

Mailing Address 6520 S Jeffrey Ave

City: Sioux Falls | State: SD | Zip Code: 57108-3227

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Avera McKennan Hospital and Univ. Heal
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 880.00

Date of Receipt: 06 / 22 / 2025
Transaction ID : 46A697A9DAF30F88B977

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 266.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585163

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hall, Susan, Marie, ,

Mailing Address 3 Bettys Path

City: West Yarmouth | State: MA | Zip Code: 02673-2601

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): St. Luke's Hospital: Southcoast Physic
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 749.98

Date of Receipt: 06 / 17 / 2025
Transaction ID : 4EA28BB3A776B3AC8E90

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hamilton, Kevin, R, ,

Mailing Address 10834 Young Rd

City: Defiance | State: OH | Zip Code: 43512-6773

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Clinical Colleagues
Occupation (for Individual): crna

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 530.39

Date of Receipt: 06 / 06 / 2025
Transaction ID : 4765A1EFF2B7D94B1AC5

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hamilton, Kevin, R, ,

Mailing Address 10834 Young Rd

City: Defiance | State: OH | Zip Code: 43512-6773

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Clinical Colleagues
Occupation (for Individual): crna

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 530.39

Date of Receipt: 06 / 29 / 2025
Transaction ID : 41C18B6103F676347C1D

Amount of Each Receipt this Period: 30.41

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 197.07

TOTAL This Period (last page this line number only) ▶

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hanson, Amy, M, ,

Mailing Address 21407 County Road 33

City: Altura | State: MN | Zip Code: 55910-4123

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Mayo Clinic
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 416.65

Date of Receipt: 06 / 01 / 2025
Transaction ID : 40F4AE32DDDC52EE317C

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hanson, Christopher, M, ,

Mailing Address 3621 Woodland St

City: Ames | State: IA | Zip Code: 50014-3467

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self
Occupation (for Individual): Anesthesia

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 2499.96

Date of Receipt: 06 / 05 / 2025
Transaction ID : 463D881AD17996046E2C

Amount of Each Receipt this Period: 416.66

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Harpe-Bates, Jennifer, L, ,

Mailing Address 1000 Fossil Creek Cir

City: Louisville | State: KY | Zip Code: 40245-5336

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of Louisville and NorthStar
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 02 / 2025
Transaction ID : 4A7ABE962991B56217F9

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 583.32

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585165

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Harris, Ashlee, , ,

Mailing Address 4451 State Route 296

City: Cable | State: OH | Zip Code: 43009-9606

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): RCB Anesthesia LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 249.96

Date of Receipt: 06 / 13 / 2025
Transaction ID : 446B87F0B7720AE70322

Amount of Each Receipt this Period: 41.66

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Harris, Catharine, , ,

Mailing Address 25 Massachusetts Ave NW
Ste 320

City: Washington | State: DC | Zip Code: 20001-7418

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): AANA
Occupation (for Individual): Assoc Director

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 692.00

Date of Receipt: 06 / 01 / 2025
Transaction ID : 4AB5A19CA5187174C6F5

Amount of Each Receipt this Period: 25.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Harris, Catharine, , ,

Mailing Address 25 Massachusetts Ave NW
Ste 320

City: Washington | State: DC | Zip Code: 20001-7418

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): AANA
Occupation (for Individual): Assoc Director

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 692.00

Date of Receipt: 06 / 21 / 2025
Transaction ID : 4831BC3C0796887365F0

Amount of Each Receipt this Period: 50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 116.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585166

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Harris, Margaret, A, ,

Mailing Address 12709 Greenwood Ave

City: Blue Island | State: IL | Zip Code: 60406-2028

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of Chicago Medicine
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 26 / 2025
Transaction ID : 4B919D3D4C4A081E0F41

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hartgerink, Adrienne, Grant, ,

Mailing Address 5101 Brookstone Way

City: Suffolk | State: VA | Zip Code: 23435-3502

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Old Dominion University
Occupation (for Individual): Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 999.99

Date of Receipt: 06 / 27 / 2025
Transaction ID : 44F58E8C6BBA082C7286

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hazel, Lisa, D, ,

Mailing Address 3030 Redford Dr

City: Greensboro | State: NC | Zip Code: 27408-3116

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Cone Health
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 04 / 2025
Transaction ID : 438E836EB27283474AFC

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 249.99

TOTAL This Period (last page this line number only) ▶

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hembrough, Nanette, M, ,

Mailing Address 6321 Dale St

City: Cass City | State: MI | Zip Code: 48726-1006

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Huron Anesthesia Services, PC
Occupation (for Individual): crna

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 06 / 22 / 2025
Transaction ID : 4B59A6E0DC0163FA296A

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hemrick, Daniel, M, ,

Mailing Address 2940 Canterbury Rd

City: Mountain Brk | State: AL | Zip Code: 35223-1204

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Dpi of Alabama
Occupation (for Individual): Crna

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 249.99

Date of Receipt: 06 / 24 / 2025
Transaction ID : 4BB7B8F0F41F6BB8DAD1

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Henker, Richard, Alynn, ,

Mailing Address 2939 Greenfield Rd

City: Glenshaw | State: PA | Zip Code: 15116-1138

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of Pittsburgh
Occupation (for Individual): Professor

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 365.00

Date of Receipt: 06 / 17 / 2025
Transaction ID : BAAA417E-C594-47AB-

Amount of Each Receipt this Period: 365.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 698.33

TOTAL This Period (last page this line number only) ▶

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Herr, Bruce, Allen, , Jr

Mailing Address 4200 Wisconsin Ave NW
Ste 106

City: Washington | State: DC | Zip Code: 20016-2143

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Independent - Allen Bruce Anesthesia P
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 624.96

Date of Receipt: 06 / 13 / 2025
Transaction ID : 4BA08C0C37D8AE85E179

Amount of Each Receipt this Period: 104.16

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hewer, Ian, , ,

Mailing Address 206 Turkey Ridge Rd

City: Fletcher | State: NC | Zip Code: 28732-0616

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Western Carolina University
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 280.00

Date of Receipt: 06 / 26 / 2025
Transaction ID : 43949282FFA36553469C

Amount of Each Receipt this Period: 40.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Higginson, Tyler, G, ,

Mailing Address N1738 Catherine Way

City: Waupaca | State: WI | Zip Code: 54981-8421

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Association of Hospital Anesthesiologi
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 27 / 2025
Transaction ID : 44239F88E175C2B676D4

Amount of Each Receipt this Period: 50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 194.16

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hill, Jena, M, ,

Mailing Address 6512 Shepherd Oaks Rd

City	State	Zip Code
Lakeland	FL	33811-3164

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
Diamante Anesthesia LLC, Teamhealth An	CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 749.99

Date of Receipt: 06 / 29 / 2025
Transaction ID : 442383DF575D6DBEC3E8

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hill, Linda, T, ,

Mailing Address 1773 Seven Pines Ln

City	State	Zip Code
Chattanooga	TN	37415-6652

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
University of Tennessee at Chattanooga	Program Director Nurse Anesthesia

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 11 / 2025
Transaction ID : 4ED087F0624CA5979E19

Amount of Each Receipt this Period: 50.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hillman, Andria, , ,

Mailing Address 14900 Avery Ranch Blvd
#286, Ste C200

City	State	Zip Code
Austin	TX	78717-3961

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
BSW	CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 249.99

Date of Receipt: 06 / 25 / 2025
Transaction ID : 46AB93869CB64B5FB474

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 216.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585170

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hines, Casey, , ,

Mailing Address 1932 Park Meadow Dr

City: Alamo | State: CA | Zip Code: 94507-2826

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Kasier
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 17 / 2025
Transaction ID : 448FBAA7BBD7DA0D4B66

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hinshaw, Cynthia, A, ,

Mailing Address 3304 Whispering Oaks

City: Temple | State: TX | Zip Code: 76504-2164

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Baylor Scott & White
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 210.00

Date of Receipt: 06 / 24 / 2025
Transaction ID : 4B7D9A671D670E7A05FE

Amount of Each Receipt this Period: 35.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hoersting, Wendy, , ,

Mailing Address 700 Wilmington Island Rd
T7, Apt T7

City: Savannah | State: GA | Zip Code: 31410-4528

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Chatham Oral Surgery
Occupation (for Individual): Staff CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 365.00

Date of Receipt: 06 / 19 / 2025
Transaction ID : 9ED115E5-0210-42AB-

Amount of Each Receipt this Period: 365.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 483.33

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hogan, Gerard, T, ,

Mailing Address 1324 Dancy St

City: Jacksonville | State: FL | Zip Code: 32205-8319

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Florida State University
Occupation (for Individual): CRNA Program Faculty

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 749.98

Date of Receipt: 06 / 12 / 2025
Transaction ID : 4200B55365F84F16E1ED

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hogan, Nicholas, Lorenz, ,

Mailing Address 410 W Cedar Ave

City: Flagstaff | State: AZ | Zip Code: 86001-1415

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Arkansas sedation and anesthesia
Occupation (for Individual): Crna

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 650.00

Date of Receipt: 06 / 01 / 2025
Transaction ID : FA0352F574B143E48826

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hogan, Nicholas, Lorenz, ,

Mailing Address 410 W Cedar Ave

City: Flagstaff | State: AZ | Zip Code: 86001-1415

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Arkansas sedation and anesthesia
Occupation (for Individual): Crna

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 650.00

Date of Receipt: 06 / 27 / 2025
Transaction ID : 45A1BEECADC7CD2C50C0

Amount of Each Receipt this Period: 275.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 458.33

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585172

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Holmes, Jay, , ,
Mailing Address 5704 Osbourne Dr
City: Windsor | State: CO | Zip Code: 80550-2748
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): NCAP
Occupation (for Individual): CRNA
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 499.98
Date of Receipt: 06 / 12 / 2025
Transaction ID : 4215B8B35E9B513D627B
Amount of Each Receipt this Period: 83.33
☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hooks, Brad, A, ,
Mailing Address 13508 County Road 1
City: Fairhope | State: AL | Zip Code: 36532-5972
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): Cajun Anesthesia, LLC
Occupation (for Individual): Cardiac/NSPM CRNA
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 1549.98
Date of Receipt: 06 / 16 / 2025
Transaction ID : 42599CE2546DEF471F41
Amount of Each Receipt this Period: 83.33
☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hopper, Lauryn, Elizabeth, ,
Mailing Address 2080 N Perry Ln
City: Clovis | State: CA | Zip Code: 93619-7488
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): Ataraxy Anesthesia
Occupation (for Individual): CRNA
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date ▼: 1249.98
Date of Receipt: 06 / 06 / 2025
Transaction ID : 42D6A11548E764C38F38
Amount of Each Receipt this Period: 208.33
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 374.99

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585173

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Howell, William, Andrew, ,

Mailing Address 4042 Island Creek Rd

City: Valdosta | State: GA | Zip Code: 31601-0190

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Sentry/NorthStar Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 12 / 2025
Transaction ID : 420EA236C33081178BF4

Amount of Each Receipt this Period: 50.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hsu, Anna, , ,

Mailing Address 2052 S Holly St
Unit 3

City: Denver | State: CO | Zip Code: 80222-5111

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of Colorado Anschutz Medica
Occupation (for Individual): Certified Registered Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 212.87

Date of Receipt: 06 / 25 / 2025
Transaction ID : 45D493829EB5F49340C1

Amount of Each Receipt this Period: 30.41

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hughes, Benjamin, T, ,

Mailing Address PO Box 269
514 E Hudson Ave

City: Folly Beach | State: SC | Zip Code: 29439-0269

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Inova Fairfax Hospital
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1249.98

Date of Receipt: 06 / 03 / 2025
Transaction ID : 4A3AA64D09191C65238C

Amount of Each Receipt this Period: 416.66

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 497.07

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585174

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Iszard, Marcia, A, ,

Mailing Address 1522 Macedonia Church Rd

City: Ridgeway | State: SC | Zip Code: 29130-9796

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of South Carolina
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 999.98

Date of Receipt: 06 / 25 / 2025
Transaction ID : 4C25997A5A0A3C204387

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jacobson, Richard, Y, ,

Mailing Address 221 Oak Wood Cir

City: Waverly | State: IA | Zip Code: 50677-9245

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Iowa Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1249.98

Date of Receipt: 06 / 20 / 2025
Transaction ID : 4D2C9117C08C085F0196

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
James, Davis, Owen, ,

Mailing Address 181 Woodcliff Rd

City: Springdale | State: AR | Zip Code: 72764-3688

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Northwest Anesthesiologist Associates
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 16 / 2025
Transaction ID : 46AAA159BB0A5011BAAD

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 249.99

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
James, Jacquelyn, , ,

Mailing Address 11920 W 775 Rd

City: Hulbert | State: OK | Zip Code: 74441-2900

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Indian Health Service
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 22 / 2025
Transaction ID : 4BC1877AFFD13F740190

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Johnson, Alexander, D, ,

Mailing Address 824 Rolling Oaks Dr

City: Onalaska | State: WI | Zip Code: 54650-7057

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Mayo Clinic Health System
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 25 / 2025
Transaction ID : 4785B1B986D59C01D220

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Johnson, Glade, Warren, ,

Mailing Address 16238 E Fairview St

City: Gilbert | State: AZ | Zip Code: 85295-1907

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Greater Anesthesia Solutions
Occupation (for Individual): Nurse anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 11 / 2025
Transaction ID : 4B0C93E92D7DC78E139C

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 249.99

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Joyce, Joseph, A, ,

Mailing Address 1010 Westminster Dr

City: Greensboro | State: NC | Zip Code: 27410-4648

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Eagle Physicians
Occupation (for Individual): Staff CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt: 06 / 01 / 2025
Transaction ID : 48008647870D7FB56F91

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kahveci, Allyson, , ,

Mailing Address 102 Sleepy Hollow Rd

City: Richmond | State: VA | Zip Code: 23229-7831

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): VCU Health System
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 227.46

Date of Receipt: 06 / 01 / 2025
Transaction ID : 4BEB87D766169B6E925F

Amount of Each Receipt this Period: 30.41

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kahveci, Selim, Hasan, ,

Mailing Address 102 Sleepy Hollow Rd

City: Richmond | State: VA | Zip Code: 23229-7831

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 999.98

Date of Receipt: 06 / 01 / 2025
Transaction ID : 46CD93055505B375B7E9

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 197.07

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585177

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kapish, Bryan, , ,

Mailing Address 810 S Tamaqua St

City: McAdoo | State: PA | Zip Code: 18237-1320

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Geisinger
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 697.06

Date of Receipt: 06 / 02 / 2025
Transaction ID : 42CC8BF9A9525E9CBC80

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Karcher, Wesley, Eric, ,

Mailing Address 428 Clubview Dr

City: Woodstock | State: GA | Zip Code: 30189-7021

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Citadel Anesthesiology
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 749.99

Date of Receipt: 06 / 27 / 2025
Transaction ID : 40CAA3B31C8CAAA19654

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kasasa, Rehema, N, ,

Mailing Address 16018 Lost Crop Dr

City: Moseley | State: VA | Zip Code: 23120-0047

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NAPA
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 29 / 2025
Transaction ID : 41CD8506B7543F17D4F8

Amount of Each Receipt this Period: 50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 216.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585178

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kawa, Nicole, , ,

Mailing Address 203 South Rd

City: Wilmington | State: DE | Zip Code: 19809-3034

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Associates in Anesthesia Inc
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 07 / 2025
Transaction ID : 4A789A767DA0EFECAC63

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Keats, Ariele, Elizabeth, ,

Mailing Address 376 Ford Ave

City: Ventura | State: CA | Zip Code: 93003-2461

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Somnia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 589.96

Date of Receipt: 06 / 16 / 2025
Transaction ID : 4BECB55F4CA571E14EFF

Amount of Each Receipt this Period: 41.66

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Khu, Remi, D, ,

Mailing Address 411 Wood Rd # 503

City: Quechee | State: VT | Zip Code: 05059-3059

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Khu Anesthesia, Inc
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 30 / 2025
Transaction ID : 4EA48A7AD8495F9FF95C

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 208.32

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585179

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
King, Daniel, David, ,

Mailing Address 3821 N Kilpatrick Ave

City: Chicago | State: IL | Zip Code: 60641-3629

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Rosalind Franklin University of Medici
Occupation (for Individual): Associate Professor

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1499.98

Date of Receipt: 06 / 17 / 2025
Transaction ID : 476BB6E947A72182A088

Amount of Each Receipt this Period: 208.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
King, Kimberly, S, ,

Mailing Address 1 Scott Ln

City: Fairfield | State: IL | Zip Code: 62837-1132

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): FMH
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.99

Date of Receipt: 06 / 29 / 2025
Transaction ID : 4FE58411767B963D0D31

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kitchen, Latonya, Jeanette, ,

Mailing Address 11757 Currin Ct

City: Plymouth | State: MI | Zip Code: 48170-3595

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Trinity Health Hospital-Ann Arbor
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 249.96

Date of Receipt: 06 / 07 / 2025
Transaction ID : 4898BC32B1C744770B9E

Amount of Each Receipt this Period: 41.66

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 333.32

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585180

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Klein, Jason, D, ,

Mailing Address 123 Savannah Heights Blvd

City: Lynd | State: MN | Zip Code: 56157-1167

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Avera Marshall
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 04 / 2025
Transaction ID : 4DE0AFE7B98DC23B9C41

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Klinkner, Jackie, , ,

Mailing Address 6036 Eden Prairie Rd

City: Minnetonka | State: MN | Zip Code: 55345-6721

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Elite Anesthesia, LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 249.96

Date of Receipt: 06 / 21 / 2025
Transaction ID : 42FF9EE0CF97B1A3F3A1

Amount of Each Receipt this Period: 41.66

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Koonce, Brian, , ,

Mailing Address 3182 Cambria Loop

City: Carson City | State: NV | Zip Code: 89703-5388

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): bkCRNA LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 27 / 2025
Transaction ID : 450FB738D3FF0E060BF6

Amount of Each Receipt this Period: 50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 174.99

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585181

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kozul, Gina, S, ,

Mailing Address 31013 N 1st Pl

City: Phoenix | State: AZ | Zip Code: 85085-7235

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CalStrong Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 25 / 2025
Transaction ID : 411E923D213C10881B03

Amount of Each Receipt this Period: 50.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Krmic, Yana, , ,

Mailing Address 41 Driftwood

City: Somers | State: NY | Zip Code: 10589-1607

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self-Employed
Occupation (for Individual): CRNA, APRN,MSN

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1320.00

Date of Receipt: 06 / 28 / 2025
Transaction ID : 46EE86712F556C5A75DA

Amount of Each Receipt this Period: 220.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lane, Laura, M, ,

Mailing Address 3138 Island Beach Rd
3138 Island Beach Rd

City: Marquette | State: MI | Zip Code: 49855-2025

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Independent locums
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 240.00

Date of Receipt: 06 / 10 / 2025
Transaction ID : 41798D3305BC38F735AA

Amount of Each Receipt this Period: 40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 310.00

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585182

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lanzillotta-Rangeley, Jennifer, , ,

Mailing Address 1432 Apple Hill Rd

City: Cincinnati | State: OH | Zip Code: 45230-5113

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): PATHO-JEN SOLUTIONS
Occupation (for Individual): CRNA/RESEARCH

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt: 06 / 28 / 2025
Transaction ID : 44259CBE4BE2BCB9DBB3

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Laquerre, Summer, Ray, ,

Mailing Address 22555 Waterbury St

City: Woodland Hills | State: CA | Zip Code: 91364-4924

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt: 06 / 06 / 2025
Transaction ID : 47D39600AEE50DCE6627

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Laramie, Amy, L, ,

Mailing Address 3660 W Tienken Rd

City: Rochester Hills | State: MI | Zip Code: 48306-3766

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 13 / 2025
Transaction ID : 4F6EB2A7DD0516F833A5

Amount of Each Receipt this Period: 50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 216.66

TOTAL This Period (last page this line number only) ▶

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lashley, Melissa, Jo, ,

Mailing Address 692 John Meyer Dr

City: Saint Charles | State: MO | Zip Code: 63304-5622

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Metro West Anesthesia
Occupation (for Individual): Certified Registered Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt: 06 / 20 / 2025
Transaction ID : 417D9C3F260C51190480

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lauro, Lisa, , ,

Mailing Address 2354 S Beach Pkwy

City: Jacksonville Beach | State: FL | Zip Code: 32250-3177

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Nurse Shark Anesthesia, LLC
Occupation (for Individual): CRNA, business owner

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt: 06 / 14 / 2025
Transaction ID : 4D3C8ECDC4586BB34BE7

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Layman, Jill, K., ,

Mailing Address 1227 S Delaware Ave

City: Springfield | State: MO | Zip Code: 65804-0203

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Missouri State University
Occupation (for Individual): CRNA, Assistant Professor

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 499.98

Date of Receipt: 06 / 04 / 2025
Transaction ID : 4365A89B684DD9426F95

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 249.99

TOTAL This Period (last page this line number only) ▶

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Layson, Nikita, Michelle, ,

Mailing Address 1399 E 26th St

City: Tulsa | State: OK | Zip Code: 74114-2733

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Layson Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 250.00

Date of Receipt: 06 / 05 / 2025
Transaction ID : 4F5AB7FDE488A52E6795

Amount of Each Receipt this Period: 125.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Leach, Steven, R, ,

Mailing Address 1049 Redfish St

City: Bayou Vista | State: TX | Zip Code: 77563-2711

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Northstar Anesthesia
Occupation (for Individual): VP CRNA Services

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 510.00

Date of Receipt: 06 / 21 / 2025
Transaction ID : 41C08F92981AAFF21807

Amount of Each Receipt this Period: 85.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lee, Amy, Whitt, ,

Mailing Address 889 Waterbury Rd

City: Midland | State: NC | Zip Code: 28107-7216

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Atrium Health
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 416.65

Date of Receipt: 06 / 13 / 2025
Transaction ID : 4D039E8748B278DB365C

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 293.33

TOTAL This Period (last page this line number only) ▶

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lee, Stephen, , ,

Mailing Address 3122 Chuska Mountain Ln

City: Manvel | State: TX | Zip Code: 77578-3690

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): U.S. Anesthesia Partners
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 17 / 2025
Transaction ID : 4322984FB9D7F1EE18FF

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lee-Villarreal, Lydia, Jiyeon, ,

Mailing Address 1 Morris Ln

City: East Lyme | State: CT | Zip Code: 06333-1536

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NEMG Anesthesia Associates of New Lond
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1249.98

Date of Receipt: 06 / 23 / 2025
Transaction ID : 4978A83C357F23A5D494

Amount of Each Receipt this Period: 208.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Leger, Sephra, Alaine, ,

Mailing Address 50 Knapp Rd

City: Dummerston | State: VT | Zip Code: 05301-7913

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Sephra Anesthesia, LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 12 / 2025
Transaction ID : 4A9F97BD9789DD78B14B

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 374.99

TOTAL This Period (last page this line number only) ▶

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lewis, Charnelle, , ,

Mailing Address 5955 Alpha Rd
Apt 1208, Ste 102

City: Dallas | State: TX | Zip Code: 75240-1123

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Somnus Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 27 / 2025
Transaction ID : 4C73AF5C8A9D3EA5BAE5

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Linton, Julie, Elizabeth, ,

Mailing Address 293 Luther Ln

City: Martinsburg | State: WV | Zip Code: 25403-5827

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Shenandoah Anesthesia LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 574.98

Date of Receipt: 06 / 24 / 2025
Transaction ID : 4D14997FFD29D2700B2A

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Loek, Wayne, K, ,

Mailing Address 1228 Richfield Ct

City: Woodridge | State: IL | Zip Code: 60517-7708

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Premiere Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 627.50

Date of Receipt: 06 / 08 / 2025
Transaction ID : 4AB1AF4DC521A9D62715

Amount of Each Receipt this Period: 17.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 184.16

TOTAL This Period (last page this line number only) ▶

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Loek, Wayne, K, ,

Mailing Address 1228 Richfield Ct

City: Woodridge | State: IL | Zip Code: 60517-7708

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Premiere Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 627.50

Date of Receipt: 06 / 10 / 2025
Transaction ID : 4D9C902F96240F505A9D

Amount of Each Receipt this Period: 210.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Loi, Marco, , ,

Mailing Address 36 Gould St

City: Wakefield | State: MA | Zip Code: 01880-2721

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Winchester Anesthesia Associates
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 23 / 2025
Transaction ID : 407B86BED200B308936E

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lucas, Lisa, L, ,

Mailing Address 7794 Kings College Ave Apt 373

City: Germantown | State: TN | Zip Code: 38138-2097

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): VAMC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 249.99

Date of Receipt: 06 / 26 / 2025
Transaction ID : 44868D69FD96BB9984AA

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 393.33

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lundgren, Karin, , ,

Mailing Address 5070 Lauderdale Ave

City: Virginia Bch | State: VA | Zip Code: 23455-1379

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Lundgren Anesthesia Care, LLC.
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 17 / 2025
Transaction ID : 4434937745DB8B3F78F8

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MacKinnon, Michael, Alexander, ,

Mailing Address 1190 E Pine Oaks Dr

City: Show Low | State: AZ | Zip Code: 85901-7356

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): MacKinnon Anestheisa
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1574.98

Date of Receipt: 06 / 29 / 2025
Transaction ID : 452A9D792EBC89DE0950

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mandelbaum, Frances, , ,

Mailing Address 14524 Bay Hills Dr

City: Largo | State: FL | Zip Code: 33774-5041

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Hca Florida Largo Hospital
Occupation (for Individual): Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 13 / 2025
Transaction ID : 4FAD920B223EAF6BF019

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 249.99

TOTAL This Period (last page this line number only) ▶

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Martin, Ridele, , ,

Mailing Address 10439 Talitha Trl

City: Richmond | State: TX | Zip Code: 77406-3167

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): UT Health Houston
Occupation (for Individual): Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 240.00

Date of Receipt: 06 / 12 / 2025
Transaction ID : 48EEBF825392210E39B8

Amount of Each Receipt this Period: 40.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Martin, Samuel, Travis, ,

Mailing Address 8000 Knebford Cir

City: Wake Forest | State: NC | Zip Code: 27587-5371

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Regional Anesthesia PLLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 365.00

Date of Receipt: 06 / 17 / 2025
Transaction ID : 2F6A621B-378D-4FCD-

Amount of Each Receipt this Period: 365.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mason, Jill, A, ,

Mailing Address 10864 Inside Loop

City: Orlando | State: FL | Zip Code: 32825-8884

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): AdventHealth University DNAP Program
Occupation (for Individual): Assistant Dean of Nursing/ Program Dir

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1083.32

Date of Receipt: 06 / 19 / 2025
Transaction ID : 40CEBD307AD748A7C8B1

Amount of Each Receipt this Period: 208.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 613.33

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mason, JP, , ,

Mailing Address 25 Massachusetts Ave NW
Ste 320

City: Washington | State: DC | Zip Code: 20001-7418

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): AANA
Occupation (for Individual): Fed Govt Affairs

Receipt For:
- [ ] Primary
- [ ] General
- [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 23 / 2025
Transaction ID : 499ABCD5742F54EE3019

Amount of Each Receipt this Period: 83.33

- [ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Matson, Jeffrey, W, ,

Mailing Address 4034 N Sawyer Ave

City: Chicago | State: IL | Zip Code: 60618-3304

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NorthShore University HealthSystem
Occupation (for Individual): Nurse Anesthetist and Nurse Educator

Receipt For:
- [ ] Primary
- [ ] General
- [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 22 / 2025
Transaction ID : 4FA5B8C6C9A598E5C2C4

Amount of Each Receipt this Period: 83.33

- [ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Matus, Teresa, M, ,

Mailing Address 5702 N 18th Pl

City: Phoenix | State: AZ | Zip Code: 85016-2602

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Breathe Easy Anesthesia Services PLLC
Occupation (for Individual): CRNA

Receipt For:
- [ ] Primary
- [ ] General
- [ ] Other (specify)

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 28 / 2025
Transaction ID : 4A459B653CDA61862D67

Amount of Each Receipt this Period: 50.00

- [ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 216.66

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Maw, Lisa, P, ,

Mailing Address 23 Summit Farm Ln

City: Saint Paul | State: MN | Zip Code: 55110-3109

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Associated Anesthesiologists, PA
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 24 / 2025
Transaction ID : 4DD48C4559DA1AB044A5

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Maxwell, Kathy, M, ,

Mailing Address 265 Sargent Dr

City: Ellsworth | State: ME | Zip Code: 04605-3072

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Nurse Anesthesia of Maine
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 2500.02

Date of Receipt: 06 / 12 / 2025
Transaction ID : 4DED8D9ED7E10CB48424

Amount of Each Receipt this Period: 208.34

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Maxwell, Kathy, M, ,

Mailing Address 265 Sargent Dr

City: Ellsworth | State: ME | Zip Code: 04605-3072

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Nurse Anesthesia of Maine
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 2500.02

Date of Receipt: 06 / 26 / 2025
Transaction ID : 40909A6CBD59EA65D1BD

Amount of Each Receipt this Period: 208.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 500.00

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585192

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McDannald, Charles, M, ,

Mailing Address 3570 S River Pkwy
Unit 1011

City: Portland | State: OR | Zip Code: 97239-4540

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): OHSU
Occupation (for Individual): NURSE

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 01 / 2025
Transaction ID : B00B0E6D-1912-4CF8-

Amount of Each Receipt this Period: 50.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McDonald, Charlene, M, ,

Mailing Address 12569 SW 15th street

City: Benton | State: KS | Zip Code: 67017

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Advanced Practice Associates, LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 240.00

Date of Receipt: 06 / 12 / 2025
Transaction ID : 446DB313F74848BA6453

Amount of Each Receipt this Period: 40.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McDonald, Kenneth, A, ,

Mailing Address 2402 Clairian Dr

City: York | State: PA | Zip Code: 17403-5056

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): North American Partners in Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 01 / 2025
Transaction ID : 4FB69BC5219B36C68E8B

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 173.33

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McGarry, Sean, P, ,

Mailing Address 659 Western Ave

City: Albany | State: NY | Zip Code: 12203-1803

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Sean P. McGarry, CRNA, PLLC
Occupation (for Individual): Owner

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 583.32

Date of Receipt: 06 / 12 / 2025
Transaction ID : 421C8F165CAA9F90C9E2

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McLean, Brenda, , ,

Mailing Address 6 Farmery Rd

City: Sandy Hook | State: CT | Zip Code: 06482-1660

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 16 / 2025
Transaction ID : 47EEB65641FCDC679D03

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McLean, Sean, Ross, ,

Mailing Address 738 N 780 E

City: Lindon | State: UT | Zip Code: 84042-2559

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Timpanogos Wellbeing
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 20 / 2025
Transaction ID : 4753B489A1B7BA790DD4

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 283.33

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585194

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Medina, Ramon, Luis, ,

Mailing Address 2649 Frontage Rd NW
Apt 606

City: Roanoke | State: VA | Zip Code: 24017-1455

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Carilion Professional Services
Occupation (for Individual): Nurse Anesthesiologist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 2449.98

Date of Receipt: 06 / 11 / 2025
Transaction ID : 4C099F070DE54790A890

Amount of Each Receipt this Period: 208.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Medina, Ramon, Luis, ,

Mailing Address 2649 Frontage Rd NW
Apt 606

City: Roanoke | State: VA | Zip Code: 24017-1455

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Carilion Professional Services
Occupation (for Individual): Nurse Anesthesiologist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 2449.98

Date of Receipt: 06 / 22 / 2025
Transaction ID : 441FAC1F1066CB1B5578

Amount of Each Receipt this Period: 200.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mellen, Regina, M, ,

Mailing Address 3093 W 163rd St N

City: Skiatook | State: OK | Zip Code: 74070-1078

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Ascension St John Jane Phillips
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 05 / 2025
Transaction ID : 44CBBE9E096E4A8B9B4B

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 491.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585195

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mellens, Joseph, Walter, ,

Mailing Address 11 N Stough St

City: Hinsdale | State: IL | Zip Code: 60521-3060

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Double vision anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 25 / 2025
Transaction ID : 4D42808FE15B321F8783

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mendoza, Yvette, M, ,

Mailing Address 865 Shellwood Way

City: Sacramento | State: CA | Zip Code: 95831-3842

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): UC Davis Medical Center
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 19 / 2025
Transaction ID : 4CCBA76CCC6A0F255118

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mercer, Michael, Reid, ,

Mailing Address 4722 W Carla Vista Dr

City: Chandler | State: AZ | Zip Code: 85226-2915

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 06 / 30 / 2025
Transaction ID : A692B34C-95E0-4408-

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 666.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585196

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Meyer, Beverly, J, ,

Mailing Address 6939 Constance St

City: Shawnee | State: KS | Zip Code: 66216-3878

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): AAKC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 250.00

Date of Receipt: 06 / 04 / 2025
Transaction ID : 4CC8B1B2A3CD910E560A

Amount of Each Receipt this Period: 125.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Miller, Patrick, , ,

Mailing Address 90 Lexington Ave Phb

City: New York | State: NY | Zip Code: 10016-8960

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NYP Brooklyn Methodist
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1000.00

Date of Receipt: 06 / 18 / 2025
Transaction ID : 3453C73B-D89C-4446-

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Milligan, Sarah, R, ,

Mailing Address 4264 W 227th St

City: Fairview Park | State: OH | Zip Code: 44126-1833

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Cleveland Clinic
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 21 / 2025
Transaction ID : 4D12B853F47F22BE0753

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1208.33

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Molina, Laura, Todd, ,

Mailing Address 3606 Boone Park Ave

City: Jacksonville | State: FL | Zip Code: 32205-9002

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): UF Jacksonville Physicians Institute
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 749.96

Date of Receipt: 06 / 21 / 2025
Transaction ID : 498ABE649491DE1274AA

Amount of Each Receipt this Period: 41.66

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Molter, Jeffrey, E, ,

Mailing Address 10335 Pinecrest Rd

City: Concord Township | State: OH | Zip Code: 44077-8814

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Western Reserve Anesthesia Associates
Occupation (for Individual): CRNA- CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1899.98

Date of Receipt: 06 / 03 / 2025
Transaction ID : 4CEA8842F9ED57512925

Amount of Each Receipt this Period: 208.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Money, Jamie, , ,

Mailing Address 31776 Stoltz Hill Rd

City: Lebanon | State: OR | Zip Code: 97355-9218

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Locums
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 30 / 2025
Transaction ID : 4D8E8D6B1FE287C38CB2

Amount of Each Receipt this Period: 50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 299.99

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585198

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Moon, Steven, Taylor, ,

Mailing Address 6138 Hollow View Ln

City: Knoxville | State: TN | Zip Code: 37924-1678

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of Tennessee Medical Center
Occupation (for Individual): Certified Registered Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1249.98

Date of Receipt: 06 / 03 / 2025
Transaction ID : 43299DDC04DE8A087E0F

Amount of Each Receipt this Period: 208.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Morales, Timothy, Warren, ,

Mailing Address 2023 Laurelwood Trl

City: Missouri City | State: TX | Zip Code: 77459-1942

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): 1099 Independent Contractor
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 03 / 2025
Transaction ID : 43B6A47E746CFB3B8D73

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Morris, Jonathan, , ,

Mailing Address 23840 Greentree Ln

City: Eustis | State: FL | Zip Code: 32736-9578

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 04 / 2025
Transaction ID : 4A10A849F6C39A7FD88F

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 374.99

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Morse, Noele, M, ,

Mailing Address 107 Kitemaug Rd

City: Uncasville | State: CT | Zip Code: 06382-2203

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Sound Physicians
Occupation (for Individual): Chief Anesthetist Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 624.99

Date of Receipt: 06 / 29 / 2025
Transaction ID : 436A9C0186461783D774

Amount of Each Receipt this Period: 208.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mullen, Lisa, , ,

Mailing Address 1117 Plane St

City: Avoca | State: PA | Zip Code: 18641-1729

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NAPA
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 06 / 04 / 2025
Transaction ID : 4331ABB5D30D068B5C11

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mund, Angela, R, ,

Mailing Address 2251 Show Basket Way

City: Mount Pleasant | State: SC | Zip Code: 29466-9500

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): MUSC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 2650.00

Date of Receipt: 06 / 15 / 2025
Transaction ID : 41B3B0E49FEADE03610B

Amount of Each Receipt this Period: 625.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1083.33

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585200

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Murphy, Mathew, John, ,

Mailing Address 3848 Daphine Dr

City: Wilmington | State: NC | Zip Code: 28409-2846

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): East Coast Anesthesia Associates
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt: 06 / 25 / 2025
Transaction ID : 4573A8060957AFFD5DAF

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mwaura, David, Mundia, ,

Mailing Address 4529 Necker Ave

City: Baltimore | State: MD | Zip Code: 21236-2927

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): MedlinkHealth anesthesia
Occupation (for Individual): Crna

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1249.98

Date of Receipt: 06 / 03 / 2025
Transaction ID : 4B0AA68EBF066E35B89F

Amount of Each Receipt this Period: 208.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ndobegang, Mbabndah, , , Jr

Mailing Address 2892 Mark Andrew Dr
Unit 206

City: Dublin | State: OH | Zip Code: 43017-3084

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Avita Health
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 249.99

Date of Receipt: 06 / 24 / 2025
Transaction ID : 41FEA1D4349A3D03E988

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 374.99

TOTAL This Period (last page this line number only) ▶

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ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Neagle, Joshua, Scott, ,

Mailing Address 29 Hanover St

City: Wallingford | State: CT | Zip Code: 06492-1612

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Integrated Anesthesia Associates
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt: 06 / 20 / 2025
Transaction ID : 42819F0BC1E3D0C01A80

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Neidig, Justin, , ,

Mailing Address 224 Inverness Trl

City: Richmond | State: KY | Zip Code: 40475-8845

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of Kentucky
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 06 / 12 / 2025
Transaction ID : 437DA2AAF3F24EE8197A

Amount of Each Receipt this Period: 75.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Neimkin, Amy, Pfeil, ,

Mailing Address 368 Woodward Ct

City: Birmingham | State: AL | Zip Code: 35242-6040

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): UAB
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 499.98

Date of Receipt: 06 / 18 / 2025
Transaction ID : 40478C6D36F2F31D5F9C

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 241.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585202

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Neubauer, Mark, A, ,

Mailing Address 4116 Walnut Creek Ct

City: Fort Worth | State: TX | Zip Code: 76137-3883

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Somnia Anesthesia
Occupation (for Individual): VP clinical operations

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1249.98

Date of Receipt: 06 / 11 / 2025
Transaction ID : 429999F73C6867704C83

Amount of Each Receipt this Period: 208.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
New, Luci, L, ,

Mailing Address 677 Buckleigh Ct NW

City: Concord | State: NC | Zip Code: 28027-6453

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Wake Forest School of Medicine Departm
Occupation (for Individual): Assistant Professor Education Innovatc

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 06 / 2025
Transaction ID : 41638D96D8999624D41F

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Newell, Susan, M, ,

Mailing Address 8440 Foxglove Ave NW

City: Clinton | State: OH | Zip Code: 44216-9502

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): newell anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 950.00

Date of Receipt: 06 / 21 / 2025
Transaction ID : 4AD9AE1256737E5ACC7C

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 391.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585203

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'Brien, Mary, K, ,

Mailing Address 1445 Deer Woods Dr NE

City: Swisher | State: IA | Zip Code: 52338-9436

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of Iowa Dept. of Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 10 / 2025
Transaction ID : 445B999348927781E807

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Olson, Joshua, David, ,

Mailing Address 2945 Burns St

City: Detroit | State: MI | Zip Code: 48214-1800

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of Detroit Mercy
Occupation (for Individual): Assistant Professor

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 825.00

Date of Receipt: 06 / 21 / 2025
Transaction ID : 4E15838068B704E3DB70

Amount of Each Receipt this Period: 50.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Orlino, Rebecca, L, ,

Mailing Address 847 Eagle Ridge Cir

City: Folsom | State: CA | Zip Code: 95630-6241

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): UC Davis Medical Center
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1249.98

Date of Receipt: 06 / 29 / 2025
Transaction ID : 4CBF85D6F029C77EB1A1

Amount of Each Receipt this Period: 208.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 341.66

TOTAL This Period (last page this line number only) ▶

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ortiz, Jamie, Danielle, ,

Mailing Address 714 E Coronado Rd

City: Phoenix | State: AZ | Zip Code: 85006-2216

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Arizona Anesthesia Solutions
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 210.00

Date of Receipt: 06 / 06 / 2025
Transaction ID : 44878739890DBDBF5702

Amount of Each Receipt this Period: 35.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Oxford, James, Matthew, ,

Mailing Address 1151 Laurel Pointe

City: Watkinsville | State: GA | Zip Code: 30677-7559

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NorthStar Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 749.98

Date of Receipt: 06 / 10 / 2025
Transaction ID : 4113AC0352859E7A40C1

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Packard, Paul, , ,

Mailing Address 1031 16th Avenue Pl NW

City: Hickory | State: NC | Zip Code: 28601-2344

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Atrium Health Cleveland
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 22 / 2025
Transaction ID : 40609ACFC2E4D59EFEC8

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 201.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585205

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Parker, Amanda, , ,

Mailing Address 311 W Illinois St
Unit 1407

City: Chicago | State: IL | Zip Code: 60654-7817

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NorthShore University HealthSystem
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 13 / 2025
Transaction ID : 4E7A8E556A4E45F8301F

Amount of Each Receipt this Period: 50.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Parker, Bethany, Corinne, ,

Mailing Address 140 Sea Oaks Blvd

City: Long Beach | State: MS | Zip Code: 39560-5841

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Hypnos Anesthesia LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 24 / 2025
Transaction ID : 4D388FF9D89B4FEBA463

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Patel, Nilu, G, ,

Mailing Address 16605 Honeybee Dr

City: Tustin | State: CA | Zip Code: 92782-1921

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): UCI
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 210.00

Date of Receipt: 06 / 05 / 2025
Transaction ID : 4DE6BE142222C8D8B893

Amount of Each Receipt this Period: 35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 168.33

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585206

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Paulin, Michael, H, ,

Mailing Address 69 Oak St

City: Watertown | State: CT | Zip Code: 06795-2742

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Woodland Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1041.65

Date of Receipt: 06 / 27 / 2025
Transaction ID : 4E8B8AA5B579D2103D6C

Amount of Each Receipt this Period: 208.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pawlikowski, David, , ,

Mailing Address 2332 Zaltana Cir

City: Minneola | State: FL | Zip Code: 34715-7937

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): VIP Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 365.00

Date of Receipt: 06 / 19 / 2025
Transaction ID : A5FBF744-CF46-4292-

Amount of Each Receipt this Period: 365.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Payne, Dierdre, V, ,

Mailing Address 1963 McCulloch Blvd N
Ste 103

City: Lake Havasu City | State: AZ | Zip Code: 86403-5700

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): DVK CRNA LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 10 / 2025
Transaction ID : 46DB824E4AC300DA489F

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 656.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585207

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pedersen, Gerald, C, ,

Mailing Address 13084 W Waterside Dr

City: Baton Rouge | State: LA | Zip Code: 70818-5850

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): DPI
Occupation (for Individual): Owner/CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 365.00

Date of Receipt: 06 / 18 / 2025
Transaction ID : 8086C38F-5043-4AFD-

Amount of Each Receipt this Period: 365.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Perez, Johana, Leandra, ,

Mailing Address 4936 Snowberry Dr

City: Fontana | State: CA | Zip Code: 92336-0763

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Kaiser Permanente
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 17 / 2025
Transaction ID : 4564963B01ED9129DA24

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Perez, Marco, V, ,

Mailing Address 600 Franklin Ave
Unit 7771

City: Garden City | State: NY | Zip Code: 11530-6844

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Perez Anesthesia, PC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 22 / 2025
Transaction ID : 4986829DCC7B5BA11768

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 531.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585208

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Phinney, Tammy, V, ,

Mailing Address 8495 Reynolda Rd

City: Pfafftown | State: NC | Zip Code: 27040-9105

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Anesthesia Associates
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 249.96

Date of Receipt: 06 / 15 / 2025
Transaction ID : 45FCBD13AF2032BD37BE

Amount of Each Receipt this Period: 41.66

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pinkerman, Christina, M, ,

Mailing Address 806 Jackson St

City: Macon | State: MO | Zip Code: 63552-2015

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): BCEC Anesthesia Services LLC
Occupation (for Individual): NURSE ANESTHETIST

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 14 / 2025
Transaction ID : 4E3FB85935F67419886E

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Plank, Cody, , ,

Mailing Address 3309 Evans St

City: Ashland | State: KY | Zip Code: 41102-6023

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): King's Daughters Medical Center
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 850.00

Date of Receipt: 06 / 25 / 2025
Transaction ID : 4BA697051B304805754B

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 224.99

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Prendergast, Cassie, Deann, ,

Mailing Address 36 Goose Cove Ln

City: Freeport | State: ME | Zip Code: 04032-6531

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Thomas Jefferson University
Occupation (for Individual): Assistant Professor

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 08 / 2025
Transaction ID : 4C52954718AB96FA5AF3

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Putman, Noel, C, ,

Mailing Address 2975 N Ramble Rd W

City: Bloomington | State: IN | Zip Code: 47408-1049

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): St Vincent Medical Group
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 30 / 2025
Transaction ID : 45E2A3461E501169B89E

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rabe, Cora, L, ,

Mailing Address 14303 Fosters Run Ln

City: Humble | State: TX | Zip Code: 77396-3888

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of Texas Medical Branch
Occupation (for Individual): Associate Professor

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 16 / 2025
Transaction ID : 40CDA221E1755CBC0C28

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 249.99

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585210

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rakesmith, Melinda, S, ,

Mailing Address 448 S Bodmer Ave

City: Strasburg | State: OH | Zip Code: 44680-1216

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Union Hospital Cleveland Clinic
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 350.00

Date of Receipt: 06 / 21 / 2025

Transaction ID : 4637A6C730B421D6AE33

Amount of Each Receipt this Period: 50.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rankin, Heather, J, ,

Mailing Address 2515 Oakleaf Cir

City: Helena | State: AL | Zip Code: 35022-7240

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Children's of Alabama
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 365.00

Date of Receipt: 06 / 25 / 2025

Transaction ID : BEC83C2A-8802-4DD3-

Amount of Each Receipt this Period: 365.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ray, Jessica, C, ,

Mailing Address 639 Fraser Ln

City: Staunton | State: VA | Zip Code: 24401-2337

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Carilion Clinic
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 749.98

Date of Receipt: 06 / 01 / 2025

Transaction ID : 428E8332D2C4888219B2

Amount of Each Receipt this Period: 83.33

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SUBTOTAL of Receipts This Page (optional) ▶ 498.33

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Reed, Troy, C, ,

Mailing Address 383 Boulder Oak Dr

City: New Braunfels | State: TX | Zip Code: 78132-3794

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): EAM
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 420.00

Date of Receipt: 06 / 12 / 2025
Transaction ID : 4D24B5EED658C7BE6669

Amount of Each Receipt this Period: 70.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Remmen, Nels, , ,

Mailing Address 4451 Castle Ct

City: Allentown | State: PA | Zip Code: 18103-9301

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Lehigh Valley Anesthesia Services
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 06 / 26 / 2025
Transaction ID : 76E5A49D-21DB-429D-

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rhodes, Lara, A, ,

Mailing Address 16718 Hibiscus Point Dr

City: Houston | State: TX | Zip Code: 77095-5092

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): US Navy
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 249.99

Date of Receipt: 06 / 28 / 2025
Transaction ID : 4903B08B90791AC6B0A7

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 653.33

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585212

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Riley, Victoria, L, ,

Mailing Address 1849 Elmdale Rd

City: Pittsburgh | State: PA | Zip Code: 15205-3931

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): VA
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 401.23

Date of Receipt: 06 / 30 / 2025
Transaction ID : 4E6F8FAD053340E26840

Amount of Each Receipt this Period: 30.41

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rios, Jennifer, Lynn, ,

Mailing Address 3026 Senita Bloom Dr

City: Manvel | State: TX | Zip Code: 77578-3688

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): US Anesthesia Partners
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 15 / 2025
Transaction ID : 48B7B67069EBBF0A91B3

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Roberts, Andrea, L, ,

Mailing Address 411 N Kniss Ave

City: Luverne | State: MN | Zip Code: 56156-1428

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Sanford Health
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 779.98

Date of Receipt: 06 / 19 / 2025
Transaction ID : 4DB48B13B203CD7D6AFC

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 197.07

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Robinson, Damali, Ayana, ,

Mailing Address 20 High St

City: Glen Rock | State: NJ | Zip Code: 07452-1421

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Hackensack University Medical Center/e
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 900.00

Date of Receipt: 06 / 05 / 2025
Transaction ID : 4E9FA0E2433308EDC77E

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Roesler, Donald, J, ,

Mailing Address 3404 W 90th St

City: Sioux Falls | State: SD | Zip Code: 57108-6303

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Semi retired 1099 self employed
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1503.98

Date of Receipt: 06 / 10 / 2025
Transaction ID : 4046A6BDCA674ED71B63

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Roesler, Donald, J, ,

Mailing Address 3404 W 90th St

City: Sioux Falls | State: SD | Zip Code: 57108-6303

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Semi retired 1099 self employed
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1503.98

Date of Receipt: 06 / 25 / 2025
Transaction ID : 42A29652FA19367A8838

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 267.33

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585214

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rohde, Kristin, M, ,

Mailing Address 17408 Burdette Cir

City: Omaha | State: NE | Zip Code: 68116-2704

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Univ. of Nebraska Medical Center
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 5079.98

Date of Receipt: 06 / 06 / 2025
Transaction ID : 4A1DAE5BCBAB8077668F

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rotter, Peter, C, ,

Mailing Address 3918 Seneca Ln

City: Manitowoc | State: WI | Zip Code: 54220-3029

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Froedtert Holy Family Memorial
Occupation (for Individual): Nurse Anesthesiologist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 12 / 2025
Transaction ID : 4E95A11061F39D2F393F

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rowe, Melanie, S, ,

Mailing Address 5125 Copper Sunset Way

City: Rancho Cordova | State: CA | Zip Code: 95742-8198

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): anesthetist center
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 30 / 2025
Transaction ID : 4E4A89FE8B6A2729E966

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 249.99

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ruetty, Joel, M, ,
Mailing Address 1429 Adena Pointe Dr
City: Marysville | State: OH | Zip Code: 43040-2560
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): RAM
Occupation (for Individual): CRNA
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 14 / 2025
Transaction ID : 4BCD9FB2546CE2CED023
Amount of Each Receipt this Period: 83.33
☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ryan, Shelli, R, ,
Mailing Address 820 County Road 262
City: Georgetown | State: TX | Zip Code: 78633-1997
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): AAG
Occupation (for Individual): CRNA
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 249.99

Date of Receipt: 06 / 25 / 2025
Transaction ID : 4C1382A8F657FF4F9C7D
Amount of Each Receipt this Period: 83.33
☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ryschon, Carolyn, Misola, ,
Mailing Address 2678 Ranger Hwy
City: Weatherford | State: TX | Zip Code: 76088-9182
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): USAP
Occupation (for Individual): CRNA
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date ▼: 212.87

Date of Receipt: 06 / 12 / 2025
Transaction ID : 4D179A87B01EF75774E0
Amount of Each Receipt this Period: 30.41
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 197.07

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585216

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sadler, Angela, M, ,

Mailing Address 696 19th St

City: Des Moines | State: IA | Zip Code: 50314-1008

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Metro Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 06 / 03 / 2025
Transaction ID : 467BB52BDB3B6A54F1D2

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Salvator, Christine, A, ,

Mailing Address 6701 N Bosworth Ave Unit B2
Unit B2

City: Chicago | State: IL | Zip Code: 60626-5284

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Northwestern Memorial Hospital
Occupation (for Individual): Nurse Anesthestist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt: 06 / 18 / 2025
Transaction ID : FE05F0CF27D6468CBD50

Amount of Each Receipt this Period: 365.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sample, Becca, , ,

Mailing Address 205 Park Ave
Unit 310

City: Minneapolis | State: MN | Zip Code: 55415-1119

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): M Health Fairview
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 682.46

Date of Receipt: 06 / 13 / 2025
Transaction ID : 4A89B5AEC9C394CEA445

Amount of Each Receipt this Period: 30.41

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 495.41

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sanchez, Donna, M, ,

Mailing Address 600 Amity Rd

City: Woodbridge | State: CT | Zip Code: 06525-1207

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Yale New Haven Hospital
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 624.99

Date of Receipt: 06 / 28 / 2025
Transaction ID : 4B5D8949D387E6008368

Amount of Each Receipt this Period: 208.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sanders, Billy, D, ,

Mailing Address 312 Merlot Ct

City: Vine Grove | State: KY | Zip Code: 40175-8695

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NorthStar Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 27 / 2025
Transaction ID : 4DD3B1C6951CA1DE7995

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sareerak, Jakkarin, Jake, ,

Mailing Address 2720 Pacific St

City: Concord | State: CA | Zip Code: 94518-1015

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): JJS Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 599.98

Date of Receipt: 06 / 15 / 2025
Transaction ID : 4FA38D89A357011B030B

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 374.99

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585218

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Schmittling, Toni, L, ,

Mailing Address 30749 Ramblewood Club Dr

City: Farmington Hills | State: MI | Zip Code: 48331-1245

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Collaborative Anesthesia Staffing Solu
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 17 / 2025
Transaction ID : 42949811EE7EF56FC1F9

Amount of Each Receipt this Period: 50.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Schneider, Adam, , ,

Mailing Address 13980 E 1130th Rd

City: Marshall | State: IL | Zip Code: 62441-5050

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): SIUE
Occupation (for Individual): Nursing

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 11 / 2025
Transaction ID : 443F96A9FD478B3E6BCF

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Schneider, Mary, Beth, ,

Mailing Address 10 Chippewa Ct

City: Madison | State: WI | Zip Code: 53711-2803

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): SSM Dean Medical Group
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 28 / 2025
Transaction ID : 4B9F8CC87CB471BAA749

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 216.66

TOTAL This Period (last page this line number only) ▶

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Schneider, Paul, A, ,

Mailing Address 908 N Main St

City: Brewer | State: ME | Zip Code: 04412-1226

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Nurse Anesthesia of Maine
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1260.00

Date of Receipt: 06 / 29 / 2025
Transaction ID : 464391AC27070E2801C2

Amount of Each Receipt this Period: 210.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Schosky, Cheryl, L, ,

Mailing Address 112 Amandas Autumn Ln

City: Taylors | State: SC | Zip Code: 29687-6356

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Quality Anesthesia Services LLC
Occupation (for Individual): Owner/President

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 2999.98

Date of Receipt: 06 / 23 / 2025
Transaction ID : 4C5A9CC78C71A2D2A522

Amount of Each Receipt this Period: 208.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Schreiber, Brianne, , ,

Mailing Address 112 Stonewall Cir

City: New Bern | State: NC | Zip Code: 28562-8997

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): No BS Staffing, Inc.
Occupation (for Individual): Locum CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 06 / 15 / 2025
Transaction ID : 4029B2CB553E5BCFAE7E

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 668.33

TOTAL This Period (last page this line number only) ▶

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Schutt, Shannon, S, ,

Mailing Address 236 Madison Ave

City: Astoria | State: OR | Zip Code: 97103-5028

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Anesthesia Associates Northwest
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 16 / 2025
Transaction ID : 41D7B821590488DEA8BE

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Scoggins, Misty, L, ,

Mailing Address 44 Conard Dr

City: West Hartford | State: CT | Zip Code: 06107-3620

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): ANESTHESIA ASSOCIATES OF Willimantic
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1249.98

Date of Receipt: 06 / 22 / 2025
Transaction ID : 499592E8D0F73B74E3F2

Amount of Each Receipt this Period: 208.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Self, William, L, ,

Mailing Address 100 Colleen Dr

City: Daytona Beach | State: FL | Zip Code: 32119-2393

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): WLS Consulting
Occupation (for Individual): Owner

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 22 / 2025
Transaction ID : 4BB3BAE4E666AF6D9F31

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 374.99

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585221

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Seligman, Ron, S, ,

Mailing Address 1661 Sanctuary Cir

City: Howell | State: MI | Zip Code: 48855-6446

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Comfortably Numb Mi, Inc.
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 750.00

Date of Receipt: 06 / 22 / 2025
Transaction ID : 4CA6A32865D934C569E7

Amount of Each Receipt this Period: 125.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Setnor, Janet, L, ,

Mailing Address 8451 Cane Bay Ct

City: Lakewood Ranch | State: FL | Zip Code: 34202-2642

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Austin-Weston Center
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 12 / 2025
Transaction ID : 4A48A3B8B98FA0F52ECE

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Shaffer, Scott, K, ,

Mailing Address 111 Timberland Ln

City: Aledo | State: TX | Zip Code: 76008-5727

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Texas Wesleyan University
Occupation (for Individual): CRNA Faculty

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1250.46

Date of Receipt: 06 / 27 / 2025
Transaction ID : 4913AC46FE14464DC3E8

Amount of Each Receipt this Period: 208.41

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 433.41

TOTAL This Period (last page this line number only) ▶

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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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sheppard, Amy, Bateman, ,

Mailing Address 2306 6th Ave

City: Fort Worth | State: TX | Zip Code: 76110-2510

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Access Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 05 / 2025
Transaction ID : 47CEAF854D410E79EC24

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Simon, Kaycee, Ann, ,

Mailing Address 4737 Westbury Dr

City: Fort Collins | State: CO | Zip Code: 80526-3836

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): self
Occupation (for Individual): crna

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.99

Date of Receipt: 06 / 25 / 2025
Transaction ID : 4EAB9B94CF8B905149F3

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Singletary, Matthew, J, ,

Mailing Address 5131 Iron Oaks Ln

City: Mulberry | State: FL | Zip Code: 33860-9531

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): MACER Anesthesia LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 18 / 2025
Transaction ID : 4FB893ABC7E815912090

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 266.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585223

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Smart, Kristin, , ,

Mailing Address 3411 York Rd

City: Winston Salem | State: NC | Zip Code: 27104-1344

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Wake Forest School of Medicine
Occupation (for Individual): Assistant Professor

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 14 / 2025
Transaction ID : 4AD9A875EBC346C8F76C

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Smith, Felecia, S, ,

Mailing Address 647 Lakeview Ave

City: Ann Arbor | State: MI | Zip Code: 48103-9704

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): St Joseph Mercy Hospital Ann Arbor
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 679.98

Date of Receipt: 06 / 20 / 2025
Transaction ID : 4F098BFA9BD59E2484E7

Amount of Each Receipt this Period: 30.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Smith, Felecia, S, ,

Mailing Address 647 Lakeview Ave

City: Ann Arbor | State: MI | Zip Code: 48103-9704

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): St Joseph Mercy Hospital Ann Arbor
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 679.98

Date of Receipt: 06 / 23 / 2025
Transaction ID : 4C588415A7F46C1394D8

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 196.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585224

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Smith, Shannon, L, ,

Mailing Address 18775 Moorepark Rd

City: Three Rivers | State: MI | Zip Code: 49093-9677

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Great Lakes Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 05 / 2025
Transaction ID : 43F992DDFCCEB7386185

Amount of Each Receipt this Period: 50.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Smith, Shawn, W, ,

Mailing Address 21711 S 187th Way

City: Queen Creek | State: AZ | Zip Code: 85142-6457

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): F.H.C.L. Enterprise
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 16 / 2025
Transaction ID : 49D1978D0421477866F9

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Smith, Zachary, , ,

Mailing Address 125 Pine Lake Dr

City: Whispering Pines | State: NC | Zip Code: 28327-9372

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Duke University
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 365.00

Date of Receipt: 06 / 02 / 2025
Transaction ID : EF912CFF-0E62-4AF8-

Amount of Each Receipt this Period: 365.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 498.33

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585225

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Smyth, Jason, , ,

Mailing Address 22 Lake Shore Dr

City: Middlefield | State: CT | Zip Code: 06455-1053

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Yale New Haven Health
Occupation (for Individual): Certified Registered Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 480.00

Date of Receipt: 06 / 05 / 2025
Transaction ID : 41E79F30C881A5B001E6

Amount of Each Receipt this Period: 120.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Snyder, Melissa, A, ,

Mailing Address 365 NE Fox Run Trl

City: Waukee | State: IA | Zip Code: 50263-7104

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self employed
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 04 / 2025
Transaction ID : 46A8BF941766F0AAC01C

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Souza, Jill, Cullipher, ,

Mailing Address 73 Rice Hope Lane

City: Pawleys Island | State: SC | Zip Code: 29585

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): McLeod Health
Occupation (for Individual): Nurse Anesthesiologist

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 06 / 13 / 2025
Transaction ID : 47D4B5EAB3030695FE94

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 453.33

TOTAL This Period (last page this line number only) ▶

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Squibbs, Jennifer, L, ,

Mailing Address 5501 S Pricetown Rd

City: Berlin Center | State: OH | Zip Code: 44401-9717

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Northstar Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 07 / 2025
Transaction ID : 4E4284B5B8281A9B7AA0

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
St Vrain, Aaron, G, ,

Mailing Address PO Box 741

City: Ketchum | State: OK | Zip Code: 74349-0741

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): StVrain Anesthesia Services LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 22 / 2025
Transaction ID : 461584C1103D371C6B18

Amount of Each Receipt this Period: 50.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stapleton, Clarissa, T, ,

Mailing Address 3432 Tampa St

City: Houston | State: TX | Zip Code: 77021-1242

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): MD Anderson Cancer Center
Occupation (for Individual): Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 15 / 2025
Transaction ID : 4AD58E1F564144CD8A5A

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 216.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585227

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Steele, Julie, MacAdam, ,

Mailing Address PO Box 4150

City: Concord | State: NH | Zip Code: 03302-4150

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Northeastern University
Occupation (for Individual): Assistant Clinical Faculty, Nurse Anes

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 400.00

Date of Receipt: 06 / 29 / 2025
Transaction ID : E7FD1A98-355A-4577-

Amount of Each Receipt this Period: 150.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stewart, Nika, S, ,

Mailing Address 5314 Soule Dr

City: Panama City | State: FL | Zip Code: 32404-7235

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 20 / 2025
Transaction ID : 4AB38EEAB51CB049FECC

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stotts, Michelle, L, ,

Mailing Address 1974 Clay Rd

City: Spencer | State: WV | Zip Code: 25276-7762

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Roane General Hospital
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1249.98

Date of Receipt: 06 / 23 / 2025
Transaction ID : 4C429092E1297B55F614

Amount of Each Receipt this Period: 208.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 441.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585228

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stump, Lawrence, R, ,

Mailing Address 9226 N Dixie Hwy

City: Newport | State: MI | Zip Code: 48166-9782

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of Michigan Flint
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 04 / 2025
Transaction ID : 1DE7371449EF497FB624

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sullivan, Casey, , ,

Mailing Address 66 Fins Right Ln

City: Hardeeville | State: SC | Zip Code: 29927-1500

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Assured Anesthesia Services LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 15 / 2025
Transaction ID : 4B8FA06A3DCAEDDD8A2D

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sullivan, Lisa, A, ,

Mailing Address 12171 Kelly Sands Way Apt 1588, Apt 1588

City: Fort Myers | State: FL | Zip Code: 33908-5946

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): SweetSnooze Anesthesia LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 21 / 2025
Transaction ID : 403EBB34E13DBE656DE1

Amount of Each Receipt this Period: 50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 233.33

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585229

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Suszan, Lauren, T, ,

Mailing Address 9005 Edgepark Rd

City: Vienna | State: VA | Zip Code: 22182-1704

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Military
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 21 / 2025
Transaction ID : 4F949681D2149FC49289

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sutter, Carolyn, A, ,

Mailing Address 2209 Altoona Rd

City: Bloomington | State: IL | Zip Code: 61705-4133

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Sutter Healthcare LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 05 / 2025
Transaction ID : 4233BD663DE7E63AC1CA

Amount of Each Receipt this Period: 50.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sutton, Drulana, Ann, ,

Mailing Address 9477 Chesapeake St

City: Highlands Ranch | State: CO | Zip Code: 80126-4038

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): self employed
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 06 / 2025
Transaction ID : 4F7BA9B973739D75E291

Amount of Each Receipt this Period: 50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 183.33

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585230

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Swanlund, Eric, Gordon, , II

Mailing Address 5508 W 66th St

City: Minneapolis | State: MN | Zip Code: 55439-1355

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Minneapolis VAMC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 249.96

Date of Receipt: 06 / 10 / 2025
Transaction ID : 498A854692258E710AC3

Amount of Each Receipt this Period: 41.66

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sweeney, Breanna, D, ,

Mailing Address 119 Lakota Pass

City: Austin | State: TX | Zip Code: 78738-6563

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): BSA Texas, PLLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 27 / 2025
Transaction ID : 4E2D84A83701CC0E675F

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sweeney, Charles, G, ,

Mailing Address 116 Green Ash Ln

City: Chalfont | State: PA | Zip Code: 18914-4416

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): United Anesthesia Services
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 14 / 2025
Transaction ID : 4D3E83C8B03F3759FC15

Amount of Each Receipt this Period: 50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 174.99

TOTAL This Period (last page this line number only) ▶

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tansey, Brianne, Marie, ,

Mailing Address 1 Old Balcom Farm Dr

City: Nashua | State: NH | Zip Code: 03062-3639

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Amoskeag Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 212.87

Date of Receipt: 06 / 29 / 2025
Transaction ID : 483B9742B29315E15F48

Amount of Each Receipt this Period: 30.41

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Taylor, Bronson, , ,

Mailing Address 11601 Roosevelt Rd

City: Mishawaka | State: IN | Zip Code: 46544-9798

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Rubicon Anesthesia Services
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 25 / 2025
Transaction ID : 428F92F5C644D687E136

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tenorio Ketcham, Jennifer, Anne, ,

Mailing Address 1732 Kodiak Cir NE

City: Atlanta | State: GA | Zip Code: 30345-4148

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Childrens Healthcare of Atlanta
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 02 / 2025
Transaction ID : 4D33A6741ED6C37A206D

Amount of Each Receipt this Period: 75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 188.74

TOTAL This Period (last page this line number only) ▶

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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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Thackston, Matthew, , ,
Mailing Address 28 53rd St SE
City: Washington | State: DC | Zip Code: 20019-6534
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): AANA
Occupation (for Individual): Federal Govt
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 509.98
Date of Receipt: 06 / 21 / 2025
Transaction ID : 4EA9ADD221CC30FF8BA9
Amount of Each Receipt this Period: 83.33
☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Thomas, Jeffrey, L, ,
Mailing Address 4222 Gosford Dr
City: Avon | State: OH | Zip Code: 44011-4419
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): Team Health
Occupation (for Individual): CRNA
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 300.00
Date of Receipt: 06 / 03 / 2025
Transaction ID : 4623ABC61BF9D5DE65EE
Amount of Each Receipt this Period: 50.00
☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Thomas, Rodrick, Emmanuel, ,
Mailing Address 101 Rainbow Dr 5732
City: Livingston | State: TX | Zip Code: 77399-9301
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): Nomadic Health Partners, LLC
Occupation (for Individual): CRNA
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date ▼: 499.98
Date of Receipt: 06 / 29 / 2025
Transaction ID : 402087B9FC6FDF7DC802
Amount of Each Receipt this Period: 83.33
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 216.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585233

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Timmerman, Nicolas, James, ,

Mailing Address 5498 Bayberry Dr

City: Cincinnati | State: OH | Zip Code: 45242-8012

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of Cincinnati medical cente
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 15 / 2025
Transaction ID : 4D8FA896EF58BA9AF969

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tornatore, Natalie, , ,

Mailing Address 7810 Bartels Rd

City: Evansville | State: IN | Zip Code: 47710-4720

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Deaconess Hospital
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 365.00

Date of Receipt: 06 / 26 / 2025
Transaction ID : 753D5BA8-8A20-49A9-

Amount of Each Receipt this Period: 365.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Towers, Heather, A, ,

Mailing Address 217 McCombs Rd

City: Venetia | State: PA | Zip Code: 15367-1340

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): BPW Medical Associates
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 480.00

Date of Receipt: 06 / 21 / 2025
Transaction ID : 46278FAA456E7D47E6A5

Amount of Each Receipt this Period: 15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 463.33

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585234

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tracy, Andy, J, ,

Mailing Address 151 E Shorewood Dr

City: Round Lake Beach | State: IL | Zip Code: 60073-2757

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Endeavor
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt: 06 / 30 / 2025
Transaction ID : 45A18548C8B0DC4502C7

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tracy, Kendra, , ,

Mailing Address 803 Wood Lily Rd

City: Solon | State: IA | Zip Code: 52333-9431

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of Iowa Hospital and Clinic
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 02 / 2025
Transaction ID : 47ECBBFCF8FE7396F9B8

Amount of Each Receipt this Period: 50.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tran, Michael, , ,

Mailing Address 708 Florida Blvd

City: Altamonte Springs | State: FL | Zip Code: 32701-2721

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): US Department of Veterans Affairs
Occupation (for Individual): Nurse Anesthesiologist

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 499.98

Date of Receipt: 06 / 13 / 2025
Transaction ID : 45ED87C8443435734208

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 216.66

TOTAL This Period (last page this line number only) ▶

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Trau, Sarah, Elizabeth, ,

Mailing Address 219 Mabrick Ave

City: Pittsburgh | State: PA | Zip Code: 15228-1317

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): St Clair Hospital
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 441.23

Date of Receipt: 06 / 28 / 2025
Transaction ID : 4F2D806588072A2E6290

Amount of Each Receipt this Period: 30.41

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Trusso, Annie, , ,

Mailing Address PMB 764 Box 10000

City: Saipan | State: MP | Zip Code: 96950-2415

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHCC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 21 / 2025
Transaction ID : 445189AA4296BEA4E51D

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tuttle, Patricia, A, ,

Mailing Address 179 Forest Glen Ln

City: Pollocksville | State: NC | Zip Code: 28573-9445

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Cone Health
Occupation (for Individual): Certified Registered Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 400.00

Date of Receipt: 06 / 06 / 2025
Transaction ID : 476CB76E02D2B3D5E045

Amount of Each Receipt this Period: 25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 155.41

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tweedy, Sarah, , ,

Mailing Address 3016 Hillside Cir

City	State	Zip Code
Norwalk	IA	50211-3000

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
Self - Tweeley, LLC	CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt: 06 / 07 / 2025

Transaction ID : 423D80F664B8BBFD3E43

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tweedy, Sarah, , ,

Mailing Address 3016 Hillside Cir

City	State	Zip Code
Norwalk	IA	50211-3000

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
Self - Tweeley, LLC	CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt: 06 / 24 / 2025

Transaction ID : 44C3DF51-A5C6-44D5-

Amount of Each Receipt this Period: 150.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vierthaler, Donna, I, ,

Mailing Address 2866 N Wilderness Ct

City	State	Zip Code
Wichita	KS	67226-2110

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
Self Employed	CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1249.98

Date of Receipt: 06 / 02 / 2025

Transaction ID : 4E1FBE60B4E872EB19A8

Amount of Each Receipt this Period: 208.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 458.33

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585237

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Villalino, Deanna, Kay, ,

Mailing Address 3002 W Julie Dr

City: Phoenix | State: AZ | Zip Code: 85027-4905

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Midwestern University
Occupation (for Individual): Assistant Professor Nurse Anesthesia

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 999.98

Date of Receipt: 06 / 07 / 2025
Transaction ID : 427D8869AFDA85DFE5A4

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Villanueva, Celeste, G, ,

Mailing Address 955 Meadowsweet Dr

City: Corte Madera | State: CA | Zip Code: 94925-1761

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Samuel Merritt University
Occupation (for Individual): Assistant VP Academic Affairs

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 06 / 02 / 2025
Transaction ID : 4685B54B40BC95AF13AB

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Voss, Luke, A, ,

Mailing Address 2910 Monterey Blvd

City: Brookfield | State: WI | Zip Code: 53005-3742

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Froedtert Hospital
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 06 / 2025
Transaction ID : 448C9880808CFFBEBA86

Amount of Each Receipt this Period: 50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 383.33

TOTAL This Period (last page this line number only) ▶

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wallace, Jerrol, B, ,

Mailing Address 433 Thistley Ln

City: Chesapeake | State: VA | Zip Code: 23322-2463

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): UNITED STATES NAVY
Occupation (for Individual): CRNA

Receipt For:
- [ ] Primary
- [ ] General
- [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 286.61

Date of Receipt: 06 / 10 / 2025

Transaction ID : 45D9BFC50957DDFC26B1

Amount of Each Receipt this Period: 20.83

- [ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wallace, Jerrol, B, ,

Mailing Address 433 Thistley Ln

City: Chesapeake | State: VA | Zip Code: 23322-2463

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): UNITED STATES NAVY
Occupation (for Individual): CRNA

Receipt For:
- [ ] Primary
- [ ] General
- [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 286.61

Date of Receipt: 06 / 27 / 2025

Transaction ID : 48D5B37191925F886ED1

Amount of Each Receipt this Period: 30.41

- [ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Weisdorffer, Robert, L, ,

Mailing Address 361 Red Gum Dr

City: Madisonville | State: LA | Zip Code: 70447-3349

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): St Tammany Parish Hospital
Occupation (for Individual): CRNA

Receipt For:
- [ ] Primary
- [ ] General
- [ ] Other (specify)

Aggregate Year-to-Date ▼: 249.96

Date of Receipt: 06 / 24 / 2025

Transaction ID : 4DB2A515D3BCE25CE336

Amount of Each Receipt this Period: 41.66

- [ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 92.90

TOTAL This Period (last page this line number only) ▶

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Welch, Gena, M, ,

Mailing Address 66 Park Island Dr

City: Lake Orion | State: MI | Zip Code: 48362-2758

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of Michigan-Flint
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 341.23

Date of Receipt: 06 / 28 / 2025
Transaction ID : 46D5B0BF23A590D5EDB2

Amount of Each Receipt this Period: 30.41

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wertz, Barbara, Lynne, ,

Mailing Address 701 S Howard Ave
Ste 106

City: Tampa | State: FL | Zip Code: 33606-2473

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Garofalo Anesthesia Services, Inc.
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 06 / 26 / 2025
Transaction ID : 47EABF353EA6ED8111A8

Amount of Each Receipt this Period: 50.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Westermann, Elizabeth, LaVon, ,

Mailing Address 2980 Oliver Ln NE

City: Iowa City | State: IA | Zip Code: 52240-7959

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Corridor Ketamine
Occupation (for Individual): Certified Registered Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 774.99

Date of Receipt: 06 / 27 / 2025
Transaction ID : 482880FDF97A3139F337

Amount of Each Receipt this Period: 208.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 288.74

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585240

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Whaley, Millicent, C, ,

Mailing Address 14994 Fells Ln

City: Orlando | State: FL | Zip Code: 32827-7477

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Nemours Children's Hospital
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 01 / 2025
Transaction ID : 49098FC087B00E7D6C00

Amount of Each Receipt this Period: 125.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wheeler, Bradley, J, ,

Mailing Address 237 Dombey Dr

City: Pittsburgh | State: PA | Zip Code: 15237-2372

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): ASPN
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 249.96

Date of Receipt: 06 / 04 / 2025
Transaction ID : 4FE9B85DD3F7C57766D6

Amount of Each Receipt this Period: 41.66

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
White, Maura, M, ,

Mailing Address 1908 E Gothic Cir

City: Green Bay | State: WI | Zip Code: 54313-4350

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): none
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 06 / 15 / 2025
Transaction ID : 4B68BFA2D933F75237DA

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 266.66

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Whitebread, Erica, Ann, ,

Mailing Address 2232 Red Fox Dr

City: Hummelstown | State: PA | Zip Code: 17036-7093

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Celestial Anesthesia, LLC
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 08 / 2025
Transaction ID : 4F8E9D290183DD2B32EE

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Whiteley, Jason, P, ,

Mailing Address 12111 S 4th St

City: Jenks | State: OK | Zip Code: 74037-4968

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Whiteley Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 11 / 2025
Transaction ID : 4C5D9DB4E9ADA13C69A7

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wickenhauser, Desiree, Araujo, ,

Mailing Address 5318 Dover Dr

City: Godfrey | State: IL | Zip Code: 62035-1417

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): DMW Health
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 29 / 2025
Transaction ID : 4A9E809396CB07A54660

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 283.33

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wieland, Keith, F, ,

Mailing Address 15 Waterford Way

City: Wallingford | State: PA | Zip Code: 19086-7250

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Wieland Anesthesia Solutions, pllc
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 742.46

Date of Receipt: 06 / 13 / 2025
Transaction ID : 4C44B5DCF349FA5A5815

Amount of Each Receipt this Period: 30.41

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Williams, Erik, D, ,

Mailing Address 668 44th St

City: Astoria | State: OR | Zip Code: 97103-2306

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Anesthesia Associates of the Northwest
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 29 / 2025
Transaction ID : 4158B2A7B45434F85C96

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Williams, Katy, L, ,

Mailing Address 762 Fairway Park Dr

City: Ann Arbor | State: MI | Zip Code: 48103-8957

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Michigan Medicine
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 240.00

Date of Receipt: 06 / 22 / 2025
Transaction ID : 40EB8C28F75370256F0D

Amount of Each Receipt this Period: 40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 153.74

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585243

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 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)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Williams, Stephen, David, ,

Mailing Address 2902 Grayland Ave

City: Richmond | State: VA | Zip Code: 23221-3524

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Dogwood Anesthesia Associates
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 249.96

Date of Receipt: 06 / 29 / 2025

Transaction ID : 4FC090F64F9FED79BDF8

Amount of Each Receipt this Period: 41.66

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Williams, Terri, S, ,

Mailing Address 269 Tremont St

City: Newington | State: CT | Zip Code: 06111-4745

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Central Connecticut State University
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.32

Date of Receipt: 06 / 28 / 2025

Transaction ID : 4897AD0D32F19911B0C6

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Williamson, Tammy, Lynne, ,

Mailing Address 223 Andrew Corley Rd

City: Lexington | State: SC | Zip Code: 29072-9338

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self employed
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 365.00

Date of Receipt: 06 / 17 / 2025

Transaction ID : B25C792A-C4F3-49F6-

Amount of Each Receipt this Period: 365.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 489.99

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585244

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Willingham, Patrick, , ,

Mailing Address 5159 Rebecca Ct

City: Orlando | State: FL | Zip Code: 32810-2746

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): AdventHealth University
Occupation (for Individual): SRNA Florida AHU

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 262.48

Date of Receipt: 06 / 12 / 2025
Transaction ID : 4107A9604C2217EDAA43

Amount of Each Receipt this Period: 2.08

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Woitzel, Ashley, , ,

Mailing Address 2319 McLeod Dr E

City: West Fargo | State: ND | Zip Code: 58078-8511

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Sanford Health
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 15 / 2025
Transaction ID : 4FE5B68EAA3C88684D95

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wolfe, Bridget, C, ,

Mailing Address 7188 Homestead Ct

City: Warrenton | State: VA | Zip Code: 20187-9521

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Medstream: Fauquier Hospital
Occupation (for Individual): Staff CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1459.00

Date of Receipt: 06 / 05 / 2025
Transaction ID : 4D769D9EF44D999A7F48

Amount of Each Receipt this Period: 199.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 284.41

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585245

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wolff, Seth, E, ,

Mailing Address 438 N 1000 E
PO Box 2561

City: Beaver | State: UT | Zip Code: 84713-7964

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Wolff Anesthesia INC.
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 03 / 2025
Transaction ID : 45A28E6E09F5D36810AF

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wommack, Aiya, Christina, ,

Mailing Address 7541 FM 2888

City: Naples | State: TX | Zip Code: 75568-8200

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NorthStar Anesthesia
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1249.98

Date of Receipt: 06 / 19 / 2025
Transaction ID : 438599E86F76F58C5B1D

Amount of Each Receipt this Period: 208.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Woodard, Anastasiya, Valery, ,

Mailing Address 8523 Epperson Mill Rd

City: Millington | State: TN | Zip Code: 38053-5319

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Anesthesia by Anastasiya
Occupation (for Individual): Nurse Anesthesiologist

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 249.96

Date of Receipt: 06 / 25 / 2025
Transaction ID : 4564947F526C9AF79A92

Amount of Each Receipt this Period: 41.66

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 333.32

TOTAL This Period (last page this line number only) ▶

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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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Woodburn-Camp, Preston, F, ,

Mailing Address 400 W Evergreen Dr

City: Fort Ashby | State: WV | Zip Code: 26719-6938

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): WVU PVH
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 11 / 2025
Transaction ID : 41B981A77D94747ACA4E

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wulf, Pamela, M, ,

Mailing Address 18726 Castellani

City: San Antonio | State: TX | Zip Code: 78258-1639

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Gastroenterology Consultants of San An
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 30 / 2025
Transaction ID : 442DB1A20996812810DC

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Yancey, Stacy, , ,

Mailing Address 1646 Tudor Dr

City: Asheboro | State: NC | Zip Code: 27205-4258

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Twin City Anesthesia
Occupation (for Individual): Certified Registered Nurse Anesthetist

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.99

Date of Receipt: 06 / 04 / 2025
Transaction ID : 4B579C36BA9F396EC8FD

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 266.66

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585247

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Young, Tracy, P, ,

Mailing Address 207 Barton Trce

City: Youngsville | State: LA | Zip Code: 70592-6633

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1499.98

Date of Receipt: 06 / 11 / 2025
Transaction ID : 44248832DFE5BBDEAE60

Amount of Each Receipt this Period: 208.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Yusuf, Nijma, , ,

Mailing Address 520 N Kingsbury St
Apt 3205, Unit 3205

City: Chicago | State: IL | Zip Code: 60654-8777

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Direct to Locums
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 749.98

Date of Receipt: 06 / 03 / 2025
Transaction ID : 417E9B844AADB159148B

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Zelaya, Pauline, , ,

Mailing Address 8009 Macnish Dr NE

City: Albuquerque | State: NM | Zip Code: 87109-6475

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Raymond G. Murphy VA, Albuqerque
Occupation (for Individual): CRNA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 499.98

Date of Receipt: 06 / 02 / 2025
Transaction ID : 47159D15F34B04966E29

Amount of Each Receipt this Period: 83.33

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 374.99

TOTAL This Period (last page this line number only) ▶ 51971.44

Image# 202507179763585248

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A.
Full Name (Last, First, Middle Initial)
Andrea Salinas For Oregon
Mailing Address PO Box 230985
City: Tigard | State: OR | Zip Code: 97281
Purpose of Disbursement: 2026 Primary
Candidate Name: Salinas, Andrea, , ,
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: OR District: 06
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00793703
Transaction ID : 36C5E788B7I
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial)
Angie Craig For Congress
Mailing Address PO Box 22116
City: Eagan | State: MN | Zip Code: 55122
Purpose of Disbursement: 2026 Primary
Candidate Name: Craig, Angie, , ,
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MN District: 02
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00575209
Transaction ID : 237D453740A
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial)
August Pfluger For Congress
Mailing Address PO Box 3530
City: San Angelo | State: TX | Zip Code: 76902
Purpose of Disbursement: 2026 Primary
Candidate Name: Pfluger, August, , , II
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: TX District: 11
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 26 / 2025
FEC Identification Number: C C00719294
Transaction ID : B2880806D6
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A.
Full Name (Last, First, Middle Initial)
Beatty For Congress
Mailing Address 222 E Town St
Fl 2W
City: Columbus | State: OH | Zip Code: 43215
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Beatty, Joyce, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: OH District: 03
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00507368
Transaction ID : 5F985DE84A(
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial)
Becca Balint For Vermont
Mailing Address PO Box 291
City: Burlington | State: VT | Zip Code: 05402
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Balint, Becca, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: VT District: 01
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00797175
Transaction ID : DB85198F718
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial)
Bonamici For Congress
Mailing Address PO Box 1632
City: Beaverton | State: OR | Zip Code: 97075
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Bonamici, Suzanne, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: OR District: 01
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00500421
Transaction ID : 70275C0596(
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name (Last, First, Middle Initial)
Carol For Congress

Mailing Address 228 S Washington St
Ste 115

City: Alexandria | State: VA | Zip Code: 22314

Purpose of Disbursement: 2026 Primary

Category/Type: 011

Candidate Name: Miller, Carol, , ,

Office Sought: [X] House [ ] Senate [ ] President
State: WV District: 01

Disbursement For: 2026
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 06 / 26 / 2025

FEC Identification Number: C C00653220
Transaction ID : 50555935055

Amount of Each Disbursement this Period: 2500.00

[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
Chris Deluzio For Congress

Mailing Address PO Box 16210

City: Pittsburgh | State: PA | Zip Code: 15242

Purpose of Disbursement: 2026 Primary

Category/Type: 011

Candidate Name: Deluzio, Chris, , ,

Office Sought: [X] House [ ] Senate [ ] President
State: PA District: 17

Disbursement For: 2026
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 06 / 09 / 2025

FEC Identification Number: C C00787648
Transaction ID : E8BECE78D8

Amount of Each Disbursement this Period: 2500.00

[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
Ciscomani For Congress

Mailing Address PO Box 35103

City: Tucson | State: AZ | Zip Code: 85740-5103

Purpose of Disbursement: 2026 Primary

Category/Type: 011

Candidate Name: Ciscomani, Juan, , , III

Office Sought: [X] House [ ] Senate [ ] President
State: AZ District: 06

Disbursement For: 2026
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 06 / 09 / 2025

FEC Identification Number: C C00786194
Transaction ID : 5555C5B4A7

Amount of Each Disbursement this Period: 5000.00

[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 10000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name (Last, First, Middle Initial)
Citizens For Waters

Mailing Address 12501 Imperial Hwy
Ste 200

City: Norwalk | State: CA | Zip Code: 90650

Purpose of Disbursement: 2026 Primary

Category/Type: 011

Candidate Name: Waters, Maxine, , ,

Office Sought: [X] House [ ] Senate [ ] President
State: CA District: 43

Disbursement For: 2026
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 06 / 09 / 2025

FEC Identification Number: C C00167585
Transaction ID : 5CD69168987

Amount of Each Disbursement this Period: 1000.00

[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
Courtney For Congress

Mailing Address PO Box 1372

City: Vernon | State: CT | Zip Code: 06066

Purpose of Disbursement: 2026 Primary

Category/Type: 011

Candidate Name: Courtney, Joe, , ,

Office Sought: [X] House [ ] Senate [ ] President
State: CT District: 02

Disbursement For: 2026
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 06 / 04 / 2025

FEC Identification Number: C C00410233
Transaction ID : 23572FEE162

Amount of Each Disbursement this Period: 1000.00

[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
Crawford For Congress

Mailing Address PO Box 16956

City: Jonesboro | State: AR | Zip Code: 72403

Purpose of Disbursement: 2026 Primary

Category/Type: 011

Candidate Name: Crawford, Rick, , ,

Office Sought: [X] House [ ] Senate [ ] President
State: AR District: 01

Disbursement For: 2026
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 06 / 09 / 2025

FEC Identification Number: C C00462374
Transaction ID : 3DACA875B2

Amount of Each Disbursement this Period: 1000.00

[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name (Last, First, Middle Initial)
Darren Soto For Congress
Mailing Address PO Box 421349
City: Kissimmee | State: FL | Zip Code: 34742
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Soto, Darren, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: FL District: 09
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00581074
Transaction ID : 5255C4BF22
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
Deborah Ross For Congress
Mailing Address PO Box 28258
City: Raleigh | State: NC | Zip Code: 27611
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Ross, Deborah, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: NC District: 02
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00729277
Transaction ID : 5CDF99C84D
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
Derek Tran For Congress
Mailing Address 10441 Stanford Ave Unit 395
City: Garden Grove | State: CA | Zip Code: 92842
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Tran, Derek, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: CA District: 45
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 26 / 2025
FEC Identification Number: C C00851790
Transaction ID : FBCCE3378
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A.
Full Name (Last, First, Middle Initial)
Diana For Congress
Mailing Address PO Box 7208
City: Kingsport | State: TN | Zip Code: 37664
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Harshbarger, Diana, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: TN District: 01
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 26 / 2025
FEC Identification Number: C C00741090
Transaction ID : 0CA027D9C1
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial)
Electgabeevans.Com
Mailing Address PO Box 350608
City: Westminster | State: CO | Zip Code: 80035
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Evans, Gabe, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: CO District: 08
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00849844
Transaction ID : A49632BCED
Amount of Each Disbursement this Period: 2000.00
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial)
Emilia Sykes For Congress
Mailing Address PO Box 1347
City: Akron | State: OH | Zip Code: 44309
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Sykes, Emilia, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: OH District: 13
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00801274
Transaction ID : 383611C591
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7000.00

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585254

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A.
Full Name (Last, First, Middle Initial)
Emily Randall For Congress
Mailing Address PO Box 1883
City: Port Orchard | State: WA | Zip Code: 98366
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Randall, Emily, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: WA District: 06
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00857094
Transaction ID : DDE7FDCEE
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial)
Eric Sorensen For Illinois
Mailing Address PO Box 1172
City: Moline | State: IL | Zip Code: 61265
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Sorensen, Eric, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: IL District: 17
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00793935
Transaction ID : 09318D0453A
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial)
Finstad For Congress
Mailing Address PO Box 923
City: New Ulm | State: MN | Zip Code: 56073
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Finstad, Brad, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: MN District: 01
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 26 / 2025
FEC Identification Number: C C00807743
Transaction ID : 4D02631636
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585255

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A.
Full Name (Last, First, Middle Initial)
Friends Of Jahana Hayes
Mailing Address PO Box 1487
City: Waterbury | State: CT | Zip Code: 06721
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Hayes, Jahana, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: CT District: 05
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00677898
Transaction ID : 2B5C37F337
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial)
Friends of Rosa DeLauro
Mailing Address 340 ORANGE STREET
City: NEW HAVEN | State: CT | Zip Code: 06511
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: DeLauro, Rosa, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: CT District: 03
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00238865
Transaction ID : 529EEBCF4C
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial)
Gabe Amo For Congress
Mailing Address PO Box 40457
City: Providence | State: RI | Zip Code: 02940
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Amo, Gabe, , , Jr.
Office Sought: [X] House [ ] Senate [ ] President
State: RI District: 01
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00838060
Transaction ID : 0B638BE0DF
Amount of Each Disbursement this Period: 1500.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 6500.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name (Last, First, Middle Initial)
Gabe Amo For Congress
Mailing Address PO Box 40457
City: Providence | State: RI | Zip Code: 02940
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Amo, Gabe, , , Jr.
Office Sought: [X] House [ ] Senate [ ] President
State: RI District: 01
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 26 / 2025
FEC Identification Number: C C00838060
Transaction ID : E2E094DE7B
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
Graves For Congress
Mailing Address PO Box 201
City: Platte City | State: MO | Zip Code: 64079
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Graves, Sam, , , Jr.
Office Sought: [X] House [ ] Senate [ ] President
State: MO District: 06
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 04 / 2025
FEC Identification Number: C C00359034
Transaction ID : B3AF864F75A
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
Helping Exceptional Leaders Organize PAC (HELO PAC)
Mailing Address PO Box 5042
City: Virginia Beach | State: VA | Zip Code: 23471
Purpose of Disbursement: 2025 Contribution
Category/Type: 011
Candidate Name: Helping Exceptional Leaders Organize PAC (HELO PAC)
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2025 [ ] Primary [ ] General [X] Other (specify) Contribution
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00820100
Transaction ID : 5D68EE5517
Amount of Each Disbursement this Period: 5000.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 10000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A.
Full Name (Last, First, Middle Initial): Iowans For Zach Nunn
Mailing Address: PO Box 8036
City: Des Moines | State: IA | Zip Code: 50301
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Nunn, Zach, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: IA District: 03
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00784389
Transaction ID : C5023055A3
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial): Janelle Bynum For Congress
Mailing Address: 10121 SE Sunnyside Rd Ste 300
City: Clackamas | State: OR | Zip Code: 97015
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Bynum, Janelle, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: OR District: 05
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00843425
Transaction ID : 3ED4B5CD05
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial): Jasmine For Us
Mailing Address: PO Box 227235
City: Dallas | State: TX | Zip Code: 75222
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Crockett, Jasmine, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: TX District: 30
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00795450
Transaction ID : FB6352510E
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585258

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A.
Full Name (Last, First, Middle Initial)
Jeff Crank For Congress
Mailing Address 9235 N Union Blvd
Ste 150
City: Colorado Springs | State: CO | Zip Code: 80920
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Crank, Jeff, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: CO District: 05
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00865592
Transaction ID : 88BA0A5D39
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial)
Jeffries For Congress
Mailing Address PO Box 65322
City: Washington | State: DC | Zip Code: 20035
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Jeffries, Hakeem, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 08
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 04 / 2025
FEC Identification Number: C C00503052
Transaction ID : 47C742503BC
Amount of Each Disbursement this Period: 5000.00
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial)
Jimmy Panetta For Congress
Mailing Address PO Box 103
City: Carmel Valley | State: CA | Zip Code: 93924
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Panetta, Jimmy, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: CA District: 19
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00592154
Transaction ID : 000665BF49I
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7000.00

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585259

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name (Last, First, Middle Initial)
Jobs, Education, & Families First Jeff PAC
Mailing Address PO Box 65322
City: Washington | State: DC | Zip Code: 20035
Purpose of Disbursement: 2025 Contribution
Candidate Name: Jobs, Education, & Families First Jeff PAC
Category/Type: 011
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2025 [ ] Primary [ ] General [X] Other (specify) ▼ Contribution
Date of Disbursement: 06 / 04 / 2025
FEC Identification Number: C C00617803
Transaction ID : 7F14DC49F1
Amount of Each Disbursement this Period: 5000.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
Joe Neguse For Congress
Mailing Address PO Box 7142
City: Boulder | State: CO | Zip Code: 80306
Purpose of Disbursement: 2026 Primary
Candidate Name: Neguse, Joe, , ,
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: CO District: 02
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00648253
Transaction ID : 151D48D7501
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
Josh Riley For Congress
Mailing Address 1220 L St NW Ste 100
City: Washington | State: DC | Zip Code: 20005
Purpose of Disbursement: 2026 Primary
Candidate Name: Riley, Josh, , ,
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 19
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify) ▼
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00793760
Transaction ID : 70FB7652AD
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name (Last, First, Middle Initial)
Julie Johnson For Congress

Mailing Address PO Box 802765

City: Dallas | State: TX | Zip Code: 75380

Purpose of Disbursement: 2026 Primary

Category/Type: 011

Candidate Name: Johnson, Julie, , ,

Office Sought: [X] House [ ] Senate [ ] President
State: TX District: 32

Disbursement For: 2026
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 06 / 09 / 2025

FEC Identification Number: C C00843003
Transaction ID : 093266795C2

Amount of Each Disbursement this Period: 1000.00

[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
Ken Calvert For Congress Committee

Mailing Address PO Box 2438

City: Corona | State: CA | Zip Code: 92878

Purpose of Disbursement: 2026 Primary

Category/Type: 011

Candidate Name: Calvert, Ken, , ,

Office Sought: [X] House [ ] Senate [ ] President
State: CA District: 41

Disbursement For: 2026
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 06 / 09 / 2025

FEC Identification Number: C C00257337
Transaction ID : D21716016AF

Amount of Each Disbursement this Period: 1000.00

[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
Kennedy For Congress

Mailing Address PO Box 536

City: Buffalo | State: NY | Zip Code: 14201

Purpose of Disbursement: 2026 Primary

Category/Type: 011

Candidate Name: Kennedy, Tim, , ,

Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 26

Disbursement For: 2026
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 06 / 09 / 2025

FEC Identification Number: C C00856526
Transaction ID : 81EE588C2F

Amount of Each Disbursement this Period: 1000.00

[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name (Last, First, Middle Initial)
Kristen For Michigan
Mailing Address PO Box 854
City: Bay City | State: MI | Zip Code: 48707
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: McDonald Rivet, Kristen, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: MI District: 08
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00864207
Transaction ID : E33E44BDE5
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
Lalota For Congress
Mailing Address PO Box 5744
City: Hauppauge | State: NY | Zip Code: 11788
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: LaLota, Nick, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 01
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00806018
Transaction ID : 7A35FE83C2
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
Lummis For Wyoming Inc.
Mailing Address 111 S Durbin St Ste 300
City: Casper | State: WY | Zip Code: 82601-2557
Purpose of Disbursement: 2026 General
Category/Type: 011
Candidate Name: Lummis, Cynthia, , ,
Office Sought: [ ] House [X] Senate [ ] President
State: WY District:
Disbursement For: 2026 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 06 / 26 / 2025
FEC Identification Number: C C00443580
Transaction ID : 600EDE441E
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name (Last, First, Middle Initial)
Mad 4 Pa PAC
Mailing Address PO Box 444
City: Glenside | State: PA | Zip Code: 19038
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Dean Cunnane, Madeleine, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: PA District: 04
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00670844
Transaction ID : F3384DE8063
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
Marie For Congress
Mailing Address PO Box 1164
City: Washougal | State: WA | Zip Code: 98671
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Gluesenkamp Perez, Marie, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: WA District: 03
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00806174
Transaction ID : 8ACB831CDF
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
Mark Pocan For Congress
Mailing Address PO Box 327
City: Madison | State: WI | Zip Code: 53701
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Pocan, Mark, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: WI District: 02
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00502179
Transaction ID : DD5B1E83AI
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A.
Full Name (Last, First, Middle Initial)
Mark Takano For Congress
Mailing Address PO Box 5214
City: Riverside | State: CA | Zip Code: 92517
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Takano, Mark, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: CA District: 39
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00498667
Transaction ID : 0AB81629D9
Amount of Each Disbursement this Period: 5000.00
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial)
McBride For Delaware Inc.
Mailing Address PO Box 1904
City: Wilmington | State: DE | Zip Code: 19899
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: McBride, Sarah, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: DE District: 01
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00843763
Transaction ID : E398D022724
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial)
Mike Bost For Congress Committee
Mailing Address PO Box 1212
City: Murphysboro | State: IL | Zip Code: 62966
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Bost, Mike, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: IL District: 12
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00546499
Transaction ID : 72221B54A5
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 10000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name (Last, First, Middle Initial)
Mike Kelly For Congress
Mailing Address PO Box 476
City: Lyndora | State: PA | Zip Code: 16045
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Kelly, Mike, , , Jr.
Office Sought: [X] House [ ] Senate [ ] President
State: PA District: 16
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 26 / 2025
FEC Identification Number: C C00474189
Transaction ID : 775E06B1912
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
Moore For Congress
Mailing Address PO Box 16646
City: Milwaukee | State: WI | Zip Code: 53216
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Moore, Gwen, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: WI District: 04
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00397505
Transaction ID : 3FFFB47996C
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
Moore For West Virginia, Inc.
Mailing Address PO Box 603
City: Harpers Ferry | State: WV | Zip Code: 25425
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Moore, Riley, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: WV District: 02
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 26 / 2025
FEC Identification Number: C C00828947
Transaction ID : 109CDA8674
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name (Last, First, Middle Initial)
Morgan McGarvey For Congress

Mailing Address PO Box 5324

City: Louisville | State: KY | Zip Code: 40255

Purpose of Disbursement: 2026 Primary

Category/Type: 011

Candidate Name: McGarvey, Morgan, , ,

Office Sought: [X] House [ ] Senate [ ] President
State: KY District: 03

Disbursement For: 2026
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 06 / 09 / 2025

FEC Identification Number: C C00791392
Transaction ID : 99979BCE74I

Amount of Each Disbursement this Period: 1000.00

[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
Mullin For America

Mailing Address PO Box 1632

City: Oklahoma City | State: OK | Zip Code: 73101

Purpose of Disbursement: 2026 Primary

Category/Type: 011

Candidate Name: Mullin, Markwayne, , ,

Office Sought: [ ] House [X] Senate [ ] President
State: OK District:

Disbursement For: 2026
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 06 / 26 / 2025

FEC Identification Number: C C00498345
Transaction ID : 59DFC839130

Amount of Each Disbursement this Period: 1000.00

[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
Nellie Pou For Congress

Mailing Address PO Box 2696

City: Paterson | State: NJ | Zip Code: 07509

Purpose of Disbursement: 2026 Primary

Category/Type: 011

Candidate Name: Pou, Nellie, , ,

Office Sought: [X] House [ ] Senate [ ] President
State: NJ District: 09

Disbursement For: 2026
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 06 / 09 / 2025

FEC Identification Number: C C00887547
Transaction ID : A88D65FE90

Amount of Each Disbursement this Period: 1000.00

[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name (Last, First, Middle Initial)
Nevadans For Steven Horsford

Mailing Address PO Box 336664

City: North Las Vegas | State: NV | Zip Code: 89033

Purpose of Disbursement: 2026 Primary

Category/Type: 011

Candidate Name: Horsford, Steven, , ,

Office Sought: [X] House [ ] Senate [ ] President
State: NV District: 04

Disbursement For: 2026
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 06 / 09 / 2025

FEC Identification Number: C C00668228
Transaction ID : 6B16A608342

Amount of Each Disbursement this Period: 2500.00

[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
Nikema For Congress, Inc

Mailing Address PO Box 311913

City: Atlanta | State: GA | Zip Code: 31131

Purpose of Disbursement: 2026 Primary

Category/Type: 011

Candidate Name: Williams, Nikema, , ,

Office Sought: [X] House [ ] Senate [ ] President
State: GA District: 05

Disbursement For: 2026
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 06 / 09 / 2025

FEC Identification Number: C C00752584
Transaction ID : AE37CDFAE7

Amount of Each Disbursement this Period: 1000.00

[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
Nikki For Congress

Mailing Address PO Box 5171

City: Springfield | State: IL | Zip Code: 62705

Purpose of Disbursement: 2026 Primary

Category/Type: 011

Candidate Name: Budzinski, Nikki, , ,

Office Sought: [X] House [ ] Senate [ ] President
State: IL District: 13

Disbursement For: 2026
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 06 / 09 / 2025

FEC Identification Number: C C00787812
Transaction ID : 2A794981E5(

Amount of Each Disbursement this Period: 2500.00

[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A.
Full Name (Last, First, Middle Initial)
Oceans PAC
Mailing Address 1032 15th St NW
Ste 247
City: Washington | State: DC | Zip Code: 20005
Purpose of Disbursement: 2025 Contribution
Category/Type: 011
Candidate Name: Oceans PAC
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2025
[ ] Primary [ ] General [X] Other (specify) ▼ Contribution
Date of Disbursement: 06 / 04 / 2025
FEC Identification Number: C C00431601
Transaction ID : 35908C3C44E
Amount of Each Disbursement this Period: 1500.00
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial)
Pat Ryan For Congress
Mailing Address PO Box 2113
City: Kingston | State: NY | Zip Code: 12402
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Ryan, Pat, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 18
Disbursement For: 2026
[X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00815290
Transaction ID : EE158562578
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial)
Patriots For Perry
Mailing Address 4075 Linglestown Rd
City: Harrisburg | State: PA | Zip Code: 17112
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Perry, Scott, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: PA District: 10
Disbursement For: 2026
[X] Primary [ ] General [ ] Other (specify) ▼
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00510164
Transaction ID : F5BB849E1A
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3500.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A.
Full Name (Last, First, Middle Initial)
Paul Tonko For Congress
Mailing Address 911 CENTRAL AVENUE # 221
City ALBANY | State NY | Zip Code 12206
Purpose of Disbursement: 2026 Primary
Candidate Name: Tonko, Paul, , ,
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 20
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 04 / 2025
FEC Identification Number: C C00450049
Transaction ID : AA14B0B9B4
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial)
Quigley For Congress
Mailing Address 1025 W Addison St Apt 515
City Chicago | State IL | Zip Code 60613
Purpose of Disbursement: 2026 Primary
Candidate Name: Quigley, Mike, , ,
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: IL District: 05
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00457556
Transaction ID : A62CE2602BI
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial)
Rob For Pa
Mailing Address 11 Dock St Unit 971
City Pittston | State PA | Zip Code 18640
Purpose of Disbursement: 2026 Primary
Candidate Name: Bresnahan, Rob, , , Jr.
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: PA District: 08
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00852137
Transaction ID : 3AEB2F1FE8
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585269

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A.
Full Name (Last, First, Middle Initial)
Robert Garcia For Congress
Mailing Address 68 W St NW
City: Washington | State: DC | Zip Code: 20001
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Garcia, Robert, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: CA District: 42
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00797795
Transaction ID : 172B891E5BI
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial)
Rudy For Indiana
Mailing Address PO Box 26141
City: Alexandria | State: VA | Zip Code: 22313
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Yakym, Rudy, , , III
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 02
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 26 / 2025
FEC Identification Number: C C00822767
Transaction ID : 651C3D03898
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial)
Scholten For Congress
Mailing Address PO Box 6233
City: Grand Rapids | State: MI | Zip Code: 49516
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Scholten, Hillary, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: MI District: 03
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00711317
Transaction ID : 30B3B12F62
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585270

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A.
Full Name (Last, First, Middle Initial)
Scott Franklin For Congress
Mailing Address PO Box 2811
City: Lakeland | State: FL | Zip Code: 33806
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Franklin, Scott, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: FL District: 18
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00742247
Transaction ID : D02BA32EB8
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial)
Smucker For Congress
Mailing Address 824 S Milledge Ave Ste 101
City: Athens | State: GA | Zip Code: 30605
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Smucker, Lloyd, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: PA District: 11
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00599464
Transaction ID : A4C9B3B5F6
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial)
Smucker For Congress
Mailing Address 824 S Milledge Ave Ste 101
City: Athens | State: GA | Zip Code: 30605
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Smucker, Lloyd, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: PA District: 11
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 26 / 2025
FEC Identification Number: C C00599464
Transaction ID : 51D7ACEAA
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name (Last, First, Middle Initial)
Strickland For Washington

Mailing Address 1625 E 72nd St
Ste 700

City: Tacoma | State: WA | Zip Code: 98404

Purpose of Disbursement: 2026 Primary

Category/Type: 011

Candidate Name: Strickland, Marilyn, , ,

Office Sought: [X] House [ ] Senate [ ] President
State: WA District: 10

Disbursement For: 2026
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 06 / 09 / 2025

FEC Identification Number: C C00732826
Transaction ID : 69BB79748A

Amount of Each Disbursement this Period: 1000.00

[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
Teresa For All

Mailing Address PO Box 2675

City: Santa Fe | State: NM | Zip Code: 87504

Purpose of Disbursement: 2026 Primary

Category/Type: 011

Candidate Name: Leger Fernandez, Teresa, , ,

Office Sought: [X] House [ ] Senate [ ] President
State: NM District: 03

Disbursement For: 2026
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 06 / 09 / 2025

FEC Identification Number: C C00704049
Transaction ID : B5C7CE56CC

Amount of Each Disbursement this Period: 1000.00

[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
The Hawkeye PAC

Mailing Address PO Box 183

City: Hudson | State: WI | Zip Code: 54016

Purpose of Disbursement: 2025 Contribution

Category/Type: 011

Candidate Name: The Hawkeye PAC

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2025
[ ] Primary [ ] General [X] Other (specify) Contribution

Date of Disbursement: 06 / 26 / 2025

FEC Identification Number: C C00379479
Transaction ID : 5B07B7F661

Amount of Each Disbursement this Period: 2500.00

[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name (Last, First, Middle Initial)
The Markey Committee
Mailing Address PO Box 69
City: Medford | State: MA | Zip Code: 02155
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Markey, Ed, , ,
Office Sought: [ ] House [X] Senate [ ] President
State: MA District:
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 26 / 2025
FEC Identification Number: C C00196774
Transaction ID : 32F39ECC98I
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
The Reed Committee
Mailing Address PO Box 8628
City: Cranston | State: RI | Zip Code: 02920
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Reed, Jack, , ,
Office Sought: [ ] House [X] Senate [ ] President
State: RI District:
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 04 / 2025
FEC Identification Number: C C00238907
Transaction ID : D09685ECEEI
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
Tokuda For Hawaii
Mailing Address PO Box 792
City: Kaneohe | State: HI | Zip Code: 96744
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Tokuda, Jill, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: HI District: 02
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00813758
Transaction ID : 2CFD4D6429
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name (Last, First, Middle Initial)
Tom Barrett For Congress
Mailing Address PO Box 15221
City: Lansing | State: MI | Zip Code: 48901
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Barrett, Tom, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: MI District: 07
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00793976
Transaction ID : 10647C17B43
Amount of Each Disbursement this Period: 2000.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
Tony Gonzales For Congress
Mailing Address PO Box 700442
City: San Antonio | State: TX | Zip Code: 78270
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Gonzales, Tony, , , II
Office Sought: [X] House [ ] Senate [ ] President
State: TX District: 23
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00706614
Transaction ID : 475093422E3
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
Tony Wied For Congress
Mailing Address PO Box 5003
City: De Pere | State: WI | Zip Code: 54115
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Wied, Tony, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: WI District: 08
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 26 / 2025
FEC Identification Number: C C00875518
Transaction ID : B31A013B52
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 5500.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A. Full Name (Last, First, Middle Initial)
Val Hoyle For Congress
Mailing Address PO Box 657
City: Springfield | State: OR | Zip Code: 97477
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Hoyle, Val, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: OR District: 04
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00796144
Transaction ID : 9E558831CE
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
Valadao For Congress
Mailing Address 5132 NORTH PALM AVENUE #227
City: FRESNO | State: CA | Zip Code: 93704
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Valadao, David, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: CA District: 22
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00499392
Transaction ID : E6C7AE0095
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
Van Orden For Congress
Mailing Address PO Box 1836
City: La Crosse | State: WI | Zip Code: 54602
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Van Orden, Derrick, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: WI District: 03
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 09 / 2025
FEC Identification Number: C C00742007
Transaction ID : E947A44F03
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

TOTAL This Period (last page this line number only) ▶

Image# 202507179763585275

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

A.
Full Name (Last, First, Middle Initial)
Vern Buchanan For Congress
Mailing Address PO Box 48928
City: Sarasota | State: FL | Zip Code: 34230
Purpose of Disbursement: 2026 Primary
Category/Type: 011
Candidate Name: Buchanan, Vern, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: FL District: 16
Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 04 / 2025
FEC Identification Number: C C00412759
Transaction ID : 9F61B5BF60(
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
Purpose of Disbursement
Category/Type
Candidate Name
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
FEC Identification Number: C
Amount of Each Disbursement this Period
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
Purpose of Disbursement
Category/Type
Candidate Name
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
FEC Identification Number: C
Amount of Each Disbursement this Period
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 2500.00

TOTAL This Period (last page this line number only) ▶ 157500.00