

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 131
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

AKSM Urology Political Action Committee 'AKSM Urology PAC'

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

A. Annaloro, Angelo, , ,

Mailing Address 6475 Overton Dr

City
Baton RougeState
LAZip Code
70808-4246FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MDOccupation (for Individual)
Baton Rouge Urology Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	D D	Y Y Y Y
04	30	2019

Transaction ID : A968951EE2BA24341B50

Amount of Each Receipt this Period

250.00

☐ Memo Item
 profit distribution deduction

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

B. Annaloro, Angelo, , ,

Mailing Address 6475 Overton Dr

City
Baton RougeState
LAZip Code
70808-4246FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MDOccupation (for Individual)
Baton Rouge Urology Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M	D D	Y Y Y Y
06	30	2019

Transaction ID : A72324AF5900E4285A1F

Amount of Each Receipt this Period

250.00

☐ Memo Item
 profit distribution deduction

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

C. Annamraju, Annath, , ,

Mailing Address 1029 Stay Lit Ct

City
BellbrookState
OHZip Code
45305-8981FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Springfield UrologyOccupation (for Individual)
Urologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M	D D	Y Y Y Y
06	30	2019

Transaction ID : A0C74A455A8CA4508B59

Amount of Each Receipt this Period

40.00

☐ Memo Item
 profit distribution deduction
SUBTOTAL of Receipts This Page (optional)..... ►

540.00

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