

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

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

FOR LINE NUMBER: PAGE 12 OF 34  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**American Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)**

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

**A. Jones, Maria, , ,**

Mailing Address 1320 Cedar Creek Dr

City  
Norman

State  
OK

Zip Code  
73071-1462

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Oklahoma City University

Occupation (for Individual)  
PT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 26 / 2019

**Transaction ID : 79339029**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**B. Catalino, Tricia, Ann, Dr,**

Mailing Address 1821 Tropical Breeze Dr

City  
Las Vegas

State  
NV

Zip Code  
89117-7231

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Touro University Nevada

Occupation (for Individual)  
PT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 26 / 2019

**Transaction ID : 79339030**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Gilbert, Jeanne, Marie, Ms,**

Mailing Address 9 Tuckers Run

City  
Ledyard

State  
CT

Zip Code  
06339-1000

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-Employed

Occupation (for Individual)  
PT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 24 / 2019

**Transaction ID : 79340436**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

1500.00