

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

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

A. Rodriguez, Adrian, O., ,

Mailing Address 719 Brownlee Dr

City
Nashville

State
TN

Zip Code
37205-3142

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nashville Skin & Cancer

Occupation (for Individual)
Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2019

Transaction ID : 76878FDB9A10F3E75C8

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

B. Roenigk, Randall, K., ,

Mailing Address 200 1st St SW
Dept of

City
Rochester

State
MN

Zip Code
55905-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mayo Clinic/Foundation

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 13 / 2019

Transaction ID : 190B72D0306BC33F29C

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Rohan, Craig, , ,

Mailing Address 135 Ascent Cir

City
Oakwood

State
OH

Zip Code
45409-2273

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Wright Patterson AFB Medical Center

Occupation (for Individual)
Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.12

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 06 / 2019

Transaction ID : 3F2D71FCA6E3E32FBEE

Amount of Each Receipt this Period

205.12

☐ Memo Item

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

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

1455.12