

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

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

A. Feeley, Kathleen, M, ,

Mailing Address 1118 State Highway 130

City
Laramie

State
WY

Zip Code
82070-9760

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Employee of Comanche County Memorial H

Occupation (for Individual)

Certified Registered Nurse Anesthetist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

08 / 05 / 2019

Transaction ID : 4901BD5929BEF170FA6E

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

B. Feeley, Kathleen, M, ,

Mailing Address 1118 State Highway 130

City
Laramie

State
WY

Zip Code
82070-9760

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Employee of Comanche County Memorial H

Occupation (for Individual)

Certified Registered Nurse Anesthetist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

08 / 28 / 2019

Transaction ID : 437B9E84540C5D42D593

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

C. Fiaschetti, Donna, J, ,

Mailing Address 9312 Harrodsburg Rd

City
Wilmore

State
KY

Zip Code
40390-9754

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Baptist Anesthesia

Occupation (for Individual)

Nurse Anesthetist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

666.64

Date of Receipt

08 / 28 / 2019

Transaction ID : 4A2B91E6CEA5EC6F8A93

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

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

249.99