

**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 7 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICARISINGPAC.ORG

A. PAUL DICKSON
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 51367

City SHREVEPORT State LA Zip Code 71135

FEC ID number of contributing federal political committee. **C**

Name of Employer MORRIS DICKSON Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15472.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 21 / 2015

Transaction ID : SA11AI.9590

Amount of Each Receipt this Period
10000.00

B. MR. MIGUEL FERNANDEZ
Full Name (Last, First, Middle Initial)

Mailing Address 121 ALHAMBRA PLAZA SUITE 1100

City CORAL GABLES State FL Zip Code 33134

FEC ID number of contributing federal political committee. **C**

Name of Employer MBF HEALTHCARE Occupation FOUNDER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 09 / 2015

Transaction ID : SA11AI.9548

Amount of Each Receipt this Period
100000.00

C. EDWARD C FORST
Full Name (Last, First, Middle Initial)

Mailing Address 47 VALLEY ROAD

City BRONXVILLE State NY Zip Code 10708

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2015

Transaction ID : SA11AI.9567

Amount of Each Receipt this Period
10000.00

SUBTOTAL of Receipts This Page (optional).....▶	120000.00
TOTAL This Period (last page this line number only).....▶	