

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

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

FOR LINE NUMBER: PAGE 14 OF 148

(check only one)

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

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NAME OF COMMITTEE (In Full)

American College of Surgeons Professional Association PAC

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

A. Biggs, Rodney, , ,

Mailing Address 1414 W 4th St

City
GilletteState
WYZip Code
82716-3328FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Rodney C Biggs, MD, PC

Occupation (for Individual)

Surgeon

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
04 / 05 / 2019

Transaction ID : DB743C1D-A86D-4721-

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

B. Blair, Elizabeth, Astin, ,

Mailing Address Section of Otolaryngology/HNS
University of ChicagoCity
ChicagoState
ILZip Code
60637FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
University of ChicagoOccupation (for Individual)
Surgeon

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 / 31 / 2019

Transaction ID : C2640584AE974EDF9A6C

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

c. Bloom, David, A., ,

Mailing Address University of Mich Dept Urol
3875 TC SPC 5330City
Ann ArborState
MIZip Code
48109-5330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
University of Mich Department Ped UrolOccupation (for Individual)
Surgeon

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2019

Transaction ID : 7F0D9A297006435B9B5D

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

1750.00