

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 29  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Cardiology PAC (HeartPAC)**

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

**A. Fry, Edward, T. A., , FACC**

Mailing Address 160 E 71st St

City  
IndianapolisState  
INZip Code  
46220-1012FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

St. Vincent Medical Group

Occupation (for Individual)

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1249.98

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03	/	23	/	2020

**Transaction ID : 4AC9B8E93BBD8197A462**

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

**B. Fung, Gordon, L., , FACC**Mailing Address 1600 Divisadero St  
# 1609City  
San FranciscoState  
CAZip Code  
94143-3010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

UCSF Medical Center at Mt. Zion

Occupation (for Individual)

ADULT CARDIOLOGY

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	/	04	/	2020

**Transaction ID : CEC39649-E84D-45FC-**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**C. Gates, Cathy, , ,**

Mailing Address 2400 N St NW

City  
WashingtonState  
DCZip Code  
20037-1153FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

American College of Cardiology

Occupation (for Individual)

Executive Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03	/	09	/	2020

**Transaction ID : 45EC9E501C5F005C69DD**

Amount of Each Receipt this Period

83.34

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

1500.00

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