

# **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 Orthotic & Prosthetic Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Harry Layton**

Mailing Address 2724 West Gore Boulevard

City State Zip Code  
 Lawton OK 73505

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lawton Brace & Limb

Occupation

Prosthetist/Orthotist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1025.00

Date of Receipt

09 / 22 / 2011

**Transaction ID : A2011-2722959**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Ellen Leimkuehler**

Mailing Address 330 John Caryle St.

City State Zip Code  
 Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Orthotic & Prosthetic Associa

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 02 / 2011

**Transaction ID : A2011-2722949**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Jon Leimkuehler**

Mailing Address 2452 Washington Road

City State Zip Code  
 Pittsburgh PA 15241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Union Orthotics & Prosthetics

Occupation

Prosthetist/Orthotist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 02 / 2011

**Transaction ID : A2011-2722950**

Amount of Each Receipt this Period

200.00

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

1200.00

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