

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

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

FOR LINE NUMBER: PAGE 97 OF 151

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Optometric Association Political Action Committee

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

A. Cocke, Dana, A, Dr.,

Mailing Address 5625 N 45th St

City
Tacoma

State
WA

Zip Code
98407-2808

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Doctor of Optometry

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 24 / 2019

Transaction ID : 44097282

Amount of Each Receipt this Period

418.88

☐ Memo Item

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

B. Wells, Mark, Turner, Dr.,

Mailing Address 2523 Starlight Ct

City
Cheyenne

State
WY

Zip Code
82009-9747

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Doctor of Optometry

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
10 / 24 / 2019

Transaction ID : 44097283

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Carroll, Martin, Howard, Dr.,

Mailing Address 3700 Essex Rd

City
Cheyenne

State
WY

Zip Code
82001-1641

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Doctor of Optometry

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 24 / 2019

Transaction ID : 44097284

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

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

491.88