

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
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NAME OF COMMITTEE (In Full)

American Psychiatric Association Political Action Committee

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

A. Pierce, Karen, L., , MD

Mailing Address 2634 N Dayton St

City
Chicago

State
IL

Zip Code
60614-2306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 29 / 2019

Transaction ID : C3841648

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Shapiro, M.D., Gabrielle, , ,

Mailing Address 343 E 74th St

City
New York

State
NY

Zip Code
10021-3752

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Union Settlement

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 26 / 2019

Transaction ID : C3840826

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

C. Shaya, Elias, , ,

Mailing Address 905 Fallscroft Way

City
Lutherville

State
MD

Zip Code
21093-1705

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MedStar Health

Occupation (for Individual)

Psychiatrist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 30 / 2019

Transaction ID : C3842243

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

1500.00