

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 ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE
(NEUROSURGERYPAC)

Full Name (Last, First, Middle Initial)

A. Dr. John L.D. Atkinson

Mailing Address 200 1st St./Neurosurgery S.W.

Mayo Clinic

City

Rochester

State

MN

Zip Code

55905

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mayo Clinic

Occupation

Neurosurgeon

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 22 / 2011

Transaction ID : SA11AI.5534

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Dr. John L.D. Atkinson

Mailing Address 200 1st St./Neurosurgery S.W.

Mayo Clinic

City

Rochester

State

MN

Zip Code

55905

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mayo Clinic

Occupation

Neurosurgeon

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
03 / 24 / 2011

Transaction ID : SA11AI.5684

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Dr. Julian E. Bailes Jr.

Mailing Address PO Box 9183

City

Morgantown

State

WV

Zip Code

26506

FEC ID number of contributing
federal political committee.

C

Name of Employer

West Virginia University

Occupation

Neurosurgeon

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 31 / 2011

Transaction ID : SA11AI.5708

Amount of Each Receipt this Period

1000.00

Contribution

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

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

1500.00