

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

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

FOR LINE NUMBER: PAGE 66 OF 116

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

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

**A. Ostrowsky, Barry, , Mr.,**

Mailing Address 448 Harding Drive

City  
South OrangeState  
NJZip Code  
07079-1319FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RWJBarnabas HealthOccupation (for Individual)  
President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2019

Transaction ID : 25251417

Amount of Each Receipt this Period

650.00

☐ Memo Item

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

**B. Palmerio, Anthony, , Mr.,**

Mailing Address 95 Narrumson Road

City  
ManasquanState  
NJZip Code  
08736-3535FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RWJBarnabas HealthOccupation (for Individual)  
SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2019

Transaction ID : 25251418

Amount of Each Receipt this Period

227.50

☐ Memo Item

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

**C. Parker, Donald, J., Mr., LCSW**

Mailing Address 2820 Smugglers Lane

City  
HammonontonState  
NJZip Code  
08037-4222FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Hackensack Meridian Health Carrier CliOccupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2019

Transaction ID : 25251419

Amount of Each Receipt this Period

975.00

☐ Memo Item

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

1852.50

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