

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

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

FOR LINE NUMBER: PAGE 494 OF 667

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Emergency Medicine Political Action Committee / American College of Emergency Physicians

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

A. Seaberg, David, Charles, ,

Mailing Address 21 Furnace St
Unit 705

City
Akron

State
OH

Zip Code
44308-1967

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Emergency Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 07 / 2019

Transaction ID : 40118713970A2DCC990B

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

B. Shah, Nisarg, N, ,

Mailing Address 3945 Centenary Ave

City
Dallas

State
TX

Zip Code
75225-5428

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Emergency Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 18 / 2019

Transaction ID : DED5FB92-83C5-4213-

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

c. Shangold, Gregory, L, ,

Mailing Address 66 Beacon Hill Dr

City
Storrs Manfld

State
CT

Zip Code
06268-2756

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Northeast Emergency Medicine Specialis

Occupation (for Individual)

Emergency Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 18 / 2019

Transaction ID : 2019072011535-13

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

850.00