

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

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

FOR LINE NUMBER: PAGE 9 OF 32

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

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

A. Edwards, Michael, , ,

Mailing Address 2905 E Side Dr

City  
AlexandriaState  
VAZip Code  
22306-1714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
American Health Care AssociationOccupation (for Individual)  
Dir Applications & Web Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 25 / 2019

Transaction ID : C3991628

Amount of Each Receipt this Period

40.71

☐ Memo Item

\* Payroll Deduction: \$13.57 bi-weekly

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

B. Elliot, Andy, , ,

Mailing Address 240 Capitol Street  
Suite 500City  
CharlestonState  
WVZip Code  
25301FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHI, LLCOccupation (for Individual)  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 06 / 2019

Transaction ID : C3988858

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

C. Erickson, Joanne, E, ,

Mailing Address 911 S Randolph St

City  
ArlingtonState  
VAZip Code  
22204-1564FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
American Health Care AssociationOccupation (for Individual)  
Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

999.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 25 / 2019

Transaction ID : C3991625

Amount of Each Receipt this Period

157.89

☐ Memo Item

\* Payroll Deduction: \$52.63 bi-weekly

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

5198.60

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