

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

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

FOR LINE NUMBER: PAGE 10 OF 21

(check only one)

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

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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. Dallam, Deborah, L, , MD

Mailing Address 1694 Optima Way

City
El PasoState
TXZip Code
79911-3040FEC 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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 26 / 2019

Transaction ID : C3888869

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. Dickey, Thomas, Oscar, , MD

Mailing Address 1014 Rustling Rd

City

Charleston

State

WV

Zip Code

25303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

WVU Dept of Psychiatry

Occupation (for Individual)

Director of Child Psychiatry

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 26 / 2019

Transaction ID : C3888847

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Dube, Anish, Ranjan, , MD

Mailing Address 707 E Ocean Blvd

Apt 1115

City

Long Beach

State

CA

Zip Code

90802-5181

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Orange County Medical Center

Occupation (for Individual)

Psychiatrist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

436.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 28 / 2019

Transaction ID : C3884071

Amount of Each Receipt this Period

84.00

☐ Memo Item

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

834.00

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