

**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)	PAGE 12 OF 20
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Physician Hospitals of America Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. T.J. Rasmussen MD</b>		Date of Receipt MM / DD / YYYY 02 / 25 / 2013 <b>Transaction ID : C6937665</b>
Mailing Address 3651 College Blvd.		Amount of Each Receipt this Period 297.62
City Leawood	State KS	Zip Code 66211
FEC ID number of contributing federal political committee. C	Name of Employer Orthopaedic & Sports Medicine	Occupation Physician
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.62	[MEMO ITEM] *

Full Name (Last, First, Middle Initial) <b>B. Charles E. Rhoades MD</b>		Date of Receipt MM / DD / YYYY 02 / 25 / 2013 <b>Transaction ID : C6937666</b>
Mailing Address 3651 College Blvd.		Amount of Each Receipt this Period 297.62
City Leawood	State KS	Zip Code 66211
FEC ID number of contributing federal political committee. C	Name of Employer Dickson-Dively Midwest Orthop.	Occupation Physician
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.62	[MEMO ITEM] *

Full Name (Last, First, Middle Initial) <b>C. Daniel A Stechschulte Jr., MD</b>		Date of Receipt MM / DD / YYYY 02 / 25 / 2013 <b>Transaction ID : C6937668</b>
Mailing Address 3651 College Blvd.		Amount of Each Receipt this Period 297.62
City Leawood	State KS	Zip Code 66211
FEC ID number of contributing federal political committee. C	Name of Employer Kansas City Orthopaedic Institute	Occupation Surgeon
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.62	[MEMO ITEM] *

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	7250.00