

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 22 OF 52

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Academy of Physician Assistants Political Action Committee (PA PAC)

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

A. Moore Gottschalk, Melinda, Ann, ,

Mailing Address 3935 Haleys Way

City

Round Rock

State

TX

Zip Code

78665-1560

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Baylor Scott & White

Occupation (for Individual)

PA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 23 / 2019

Transaction ID : AEC23CE51C2684CC098C

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Nelson, Jeremy, Lewis, ,

Mailing Address 2024 Bluffwood Cir

City

Coralville

State

IA

Zip Code

52241-3492

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
University of Iowa Hospital and Clinic

Occupation (for Individual)

PA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2019

Transaction ID : A3359FAA8B7314D3AB40

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Orozco, Jennifer, M., ,

Mailing Address 221 S Hickory Ave

City

Bartlett

State

IL

Zip Code

60103-4416

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Rush University

Occupation (for Individual)

PA

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
03 / 18 / 2019

Transaction ID : A96EC05EF7908409CAC5

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

800.00