

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)

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

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NAME OF COMMITTEE (In Full)

Spine PAC of the National Association of Spine Specialists

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

A. Wang, Mark, J, Dr, MD

Mailing Address 8226 E Appaloosa Trl

City
Scottsdale

State
AZ

Zip Code
85258-1305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Spine Institute of Arizona

Occupation (for Individual)
Physician Orthopedic Surgeon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
09 / 25 / 2019

Transaction ID : AAEDB95D6FF794C178FF

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

B. Whitcomb, Gregory, L, Dr, DC

Mailing Address PO Box 36

City
Thiensville

State
WI

Zip Code
53092-0036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medical College of Wisconsin

Occupation (for Individual)
Chiropractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
09 / 26 / 2019

Transaction ID : A99963FD934FC49C598F

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

c. Wong, David, A, Dr, MD MSc FRC

Mailing Address 2415 Stonecrop Way

City
Golden

State
CO

Zip Code
80401-8526

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Denver Spine

Occupation (for Individual)
Physician Orthopedic Surgeon

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

765.00

Date of Receipt

MM / DD / YYYY
09 / 16 / 2019

Transaction ID : AE597560A2C7F41528BA

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

1335.00

10771.00