

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)

American Dental Association Political Action Committee

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

A. Greenwell, Darren, Scott, Dr.,

Mailing Address 226 Woodland Pass

City

Mount Washington

State

KY

Zip Code

40047-6864

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

self-employed

Occupation (for Individual)

Dentist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

249.99

Date of Receipt

MM / DD / YYYY
05 / 03 / 2020

Transaction ID : AA35CD446EDC14759BB5

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

B. Howell, Christine, Danielle, Dr.,

Mailing Address 5837 Harbour View Blvd
Unit 1209

City

Suffolk

State

VA

Zip Code

23435-2657

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Howell Dentistry

Occupation (for Individual)

Dentist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

MM / DD / YYYY
05 / 13 / 2020

Transaction ID : A2B9D45991A954FDFB6A

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Kerr, David, R, Dr.,

Mailing Address 26 Middle Rd

City

Falmouth

State

ME

Zip Code

04105-1835

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Dentist

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

416.65

Date of Receipt

MM / DD / YYYY
05 / 04 / 2020

Transaction ID : ACD581E6846544A51877

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

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

416.66