

# **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 Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)**

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

**A. Kinross, Shawn, F, ,**

Mailing Address 325 S Staci Ct

City  
Cedar City

State  
UT

Zip Code  
84720-1828

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Cedar Anesthesia Group

Occupation (for Individual)  
Crna

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 12 / 2019

**Transaction ID : 4021A2D7C123639E1D4F**

Amount of Each Receipt this Period

30.41

☐ Memo Item

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

**B. Kipple, John, Christopher, ,**

Mailing Address 326 Hemlock Dr

City  
Rock Springs

State  
WY

Zip Code  
82901-7511

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SOUTHWEST PAIN MANAGEMENT

Occupation (for Individual)  
PAIN MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2019

**Transaction ID : 48EFB7C64A4DFD47C95C**

Amount of Each Receipt this Period

30.41

☐ Memo Item

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

**C. Kipta, Margaret, Maria, ,**

Mailing Address 8847 Monticello Ave

City  
Skokie

State  
IL

Zip Code  
60076-2345

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Mt Sinai Hospital

Occupation (for Individual)  
CRNA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

329.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 04 / 2019

**Transaction ID : 4432B0FF5164D151CF7C**

Amount of Each Receipt this Period

30.41

☐ Memo Item

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

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

91.23