

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. Morris, Jonathan, , ,

Mailing Address 934 W New Hampshire St

City
Orlando

State
FL

Zip Code
32804-5755

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
CRNA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.65

Date of Receipt

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

Transaction ID : 46A99E066E1AF2E1BD3E

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

B. Morrow, Morgan, J, ,

Mailing Address 19410 N 68th Ave

City
Glendale

State
AZ

Zip Code
85308-5513

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MIDWESTERN UNIVERSITY

Occupation (for Individual)
CRNA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.10

Date of Receipt

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

Transaction ID : 494F871C9226E912E3BB

Amount of Each Receipt this Period

30.41

☐ Memo Item

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

C. Mueller, Joseph, Thomas, ,

Mailing Address 8000 Highway 290 W
Apt 9202

City
Austin

State
TX

Zip Code
78736-0012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JTM Anesthesia

Occupation (for Individual)
CRNA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 03 / 2019

Transaction ID : 437F95E60D21EEEC063C

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

213.74