

**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 6 OF 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**GIPAC**

**A. Dr. Edgar Achkar**  
Full Name (Last, First, Middle Initial)

Mailing Address 2500 Cedarwood Road

City State Zip Code  
Pepper Pike OH 44124

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Cleveland Clinic Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 30 / 2012

**Transaction ID : A2012-628189**

Amount of Each Receipt this Period  
1500.00

**B. Dr. Robert B Cameron**  
Full Name (Last, First, Middle Initial)

Mailing Address 2871 Courtland Blvd.

City State Zip Code  
Shaker Hts. OH 44122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Hershey Medical Center Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
01 / 27 / 2012

**Transaction ID : A2012-44804**

Amount of Each Receipt this Period  
1000.00

**C. Dr. Francis Farraye**  
Full Name (Last, First, Middle Initial)

Mailing Address 720 Harrison Avenue  
Suite 405

City State Zip Code  
Boston MA 02118

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Boston Medical Center Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
01 / 31 / 2012

**Transaction ID : A2012-737174**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	