

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 College of Cardiology Political Action Committee

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

A. Malhotra, Sanjay, , , FACC

Mailing Address 1603 Liege Dr

City
Henderson

State
NV

Zip Code
89012-7240

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 30 / 2017

Transaction ID : EF4AE799750116856C4

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. Martin, Edward, T., , FACC

Mailing Address 2929 E 68th St

City
Tulsa

State
OK

Zip Code
74136-4535

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oklahoma Heart Institute

Occupation (for Individual)

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 30 / 2017

Transaction ID : 8D510A4577A8222A112

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

c. McKee, Scott, A., , FACC

Mailing Address 55 Whitcner St NE
Ste 350

City
Marietta

State
GA

Zip Code
30060-1129

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WellStar Cardiovascular Medicine

Occupation (for Individual)

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 30 / 2017

Transaction ID : 9B8C8AEA21B38399045

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

2500.00