

# **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. Steele, Rachel, , Dr.,**

Mailing Address 924 Alderman St

City  
Tomah

State  
WI

Zip Code  
54660-3246

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Dentist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 16 / 2018

Transaction ID : AF932A59FB86447E1AA7

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**B. Stevens, Richard, D., Mr.,**

Mailing Address West Virginia Dental Association  
2016 1/2 Kanawha Blvd

City

Charleston

State

WV

Zip Code

25311-2204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

West Virginia Dental Association

Occupation (for Individual)

Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 02 / 2018

Transaction ID : A4BD7BE1A245246DC8CB

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Tepe, Patrick, J, Dr.,**

Mailing Address 7329 University Ave

City

Middleton

State

WI

Zip Code

53562-3109

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

self-employed

Occupation (for Individual)

Dentist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 16 / 2018

Transaction ID : AF260020BB1BE4444A02

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

1000.00