

**SCHEDULE A (FEC Form Form 3X
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 161

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. JENNIFER GRASS		Date of Receipt M / D / Y 03 / 10 / 2003
Mailing Address 281 HIGHLAND TERR AVE		Transaction ID: SA11A1.21745
City KETTERING	State OH	Zip Code 45429
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer PEDIATRIC ANESTH DAYTON		Occupation PHYSICIAN
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) B. GLENN GRAVLEE		Date of Receipt M / D / Y 03 / 14 / 2003
Mailing Address 114B MILLCREEK CT		Transaction ID: SA11A1.21459
City COLUMBUS	State OH	Zip Code 43220
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer OHIO STATE UNIV		Occupation ANESTHESIOLOGIST
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) C. DANIEL GREENBERG		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address 2580 E 5700 S		Transaction ID: SA11A1.22333
City OGDEN	State UT	Zip Code 84403
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer ROCKY MOUNTAIN ANESTH		Occupation ANESTHESIOLOGIST
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶

1000.00

TOTAL This Period (last page this line number only) ▶