

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

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

FOR LINE NUMBER: PAGE 16 / 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF PSYCHIATRIC HEALTH SYSTEMS POLITICAL ACTION COMMITTEE (N-APHS/PAC)

Full Name (Last, First, Middle Initial) A. Ms Vicki Pevsner		Date of Receipt M / D / Y Y Y Y 03 / 01 / 2005
Mailing Address 2255 Broadway Drive		Transaction ID: SA11A1.4121
City Hattiesburg	State MS	Zip Code 39402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Pine Grove	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms. Diana Ramsey		Date of Receipt M / D / Y Y Y Y 03 / 23 / 2005
Mailing Address 21 E. Churchill Street		Transaction ID: SA11A1.4934
City Baltimore	State MD	Zip Code 21230
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Sheppard Pratt Health System	Occupation Executive VP/COO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Ms Patricia Recupero		Date of Receipt M / D / Y Y Y Y 02 / 18 / 2005
Mailing Address 37 Elmway		Transaction ID: SA11A1.4110
City Providence	State RI	Zip Code 02508
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Butler Hospital	Occupation President/CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	