

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

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

FOR LINE NUMBER: PAGE 217 OF 392

(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 (ASA PAC)**

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

**A. Morrow, Scott, , ,**

Mailing Address 1619 Holts Grove Cir

City  
Winter Park

State  
FL

Zip Code  
32789-5116

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USAP of Florida

Occupation (for Individual)  
Anesthesiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.94

Date of Receipt

09 / 12 / 2019

Transaction ID : 4413AF83468387DA982C

Amount of Each Receipt this Period

41.66

☐ Memo Item

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

**B. Motonaga, Gregg, , ,**

Mailing Address 340 Diane Ln

City  
Soldotna

State  
AK

Zip Code  
99669-7301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CPH

Occupation (for Individual)  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 29 / 2019

Transaction ID : EB52314D-711D-45BA-

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**C. Mueller, Joseph, , ,**

Mailing Address 16 Hidden Hills Way

City  
Arden

State  
NC

Zip Code  
28704-6110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Mission Community Anesthesia Specialis

Occupation (for Individual)  
Anesthesiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 15 / 2019

Transaction ID : 4C4C3EBD-1CE3-4A0C-

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)..... ►

791.66