

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

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

FOR LINE NUMBER: PAGE 226 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. Nichols, Michael, , ,

Mailing Address 4260 Crossland Dr

City
CummingState
GAZip Code
30040-5285FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Envision HealthcareOccupation (for Individual)
AA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 16 / 2019

Transaction ID : 46E2A87F5B7878702DB6

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

B. Nick, Michael, , ,

Mailing Address 2500 SE Bison Rd

City
BartlesvilleState
OKZip Code
74006-7621FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Jane Phillips Medical CenterOccupation (for Individual)
Anesthesiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 01 / 2019

Transaction ID : 482CBB12711D1E818BB5

Amount of Each Receipt this Period

41.66

☐ Memo Item

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

C. Nicolescu, Teodora-Orhidee, , ,

Mailing Address 1104 Providence Ct

City
EdmondState
OKZip Code
73003-6155FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oklahoma UniversityOccupation (for Individual)
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

454.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2019

Transaction ID : 4E0C9DBE75125960526B

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

174.99

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