

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)

Friends of Community Oncology PAC

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

A. Shapiro, Nella, , , MD

Mailing Address 2425 Eastchester Road

City
Bronx

State
NY

Zip Code
10469-5932

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
New York Cancer & Blood Specialists

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.32

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2020

Transaction ID : 14025491

Amount of Each Receipt this Period

416.66

☐ Memo Item

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

B. Broun, Edward, , , Dr.

Mailing Address 10286 Deerfield Rd

City
Cincinnati

State
OH

Zip Code
45242-5103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oncology Hematology Care Inc.

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2020

Transaction ID : 14025493

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

499.99

133606.63