

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

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

FOR LINE NUMBER: PAGE 136 OF 207

(check only one)

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

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

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

**A. Patel, Manisha, , MD**

Mailing Address 330 E 33rd St Apt 3G

City  
New YorkState  
NYZip Code  
10016-9427FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Thomas Jefferson University HospitalOccupation (for Individual)  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 28 / 2019

Transaction ID : C3914037

Amount of Each Receipt this Period

120.00

☐ Memo Item

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

**B. Patel, Ripple, , DO**

Mailing Address 24 Sheffield Dr

City  
MoorestownState  
NJZip Code  
08057-3089FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information RequestedOccupation (for Individual)  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 28 / 2019

Transaction ID : C3914032

Amount of Each Receipt this Period

80.00

☐ Memo Item

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

**C. Patel, Rita, S, ,**

Mailing Address 3 Ware Rd

City  
Upper Saddle RiverState  
NJZip Code  
07458-1919FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Hackensack Radiology GroupOccupation (for Individual)  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

232.18

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 06 / 2019

Transaction ID : C3911423

Amount of Each Receipt this Period

17.86

☐ Memo Item

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

217.86

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