

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC)

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

A. Morris, Jonathan, , ,

Mailing Address 934 W New Hampshire St

City
OrlandoState
FLZip Code
32804-5755FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
CRNA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2020

Transaction ID : 44059EE30364C1449D97

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

B. Morris, Lori Maxine, , ,

Mailing Address 675 Boca Ciega Point Blvd S

City

Saint Petersburg

State

FL

Zip Code

33708-2717

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VA Bay Pines HospitalOccupation (for Individual)
CRNA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2020

Transaction ID : 4B2B8ADF79E47209F6B3

Amount of Each Receipt this Period

83.33

☐ Memo Item

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

C. Mueller, Joseph, Thomas, ,Mailing Address 9201 Brodie Ln
Unit 1602

City

Austin

State

TX

Zip Code

78748-6288

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JTM AnesthesiaOccupation (for Individual)
CRNA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : 42F09084A6ADF6B2F60E

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

266.66

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