

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

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

FOR LINE NUMBER: PAGE 163 OF 340

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**CA Hospital Association PAC-Fed Spons by CA Assn of Hospitals & Health Systems (CAHHS)**

<p>Full Name (Last, First, Middle Initial)  <b>A. Patricia Ward</b></p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  08 / 29 / 2013  <b>Transaction ID : INCA11354</b></p>	
<p>Mailing Address 1215 K St  800</p>		<p>Amount of Each Receipt this Period  46.00</p>	
<p>City State Zip Code  Sacramento CA 95814</p>	<p>FEC ID number of contributing federal political committee.  C</p>		
<p>Name of Employer  California Hospital Association</p>	<p>Occupation  Program Coordinator</p>		
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Aggregate Year-to-Date ▼  483.00</p>		
<p>Full Name (Last, First, Middle Initial)  <b>B. Peggy Wheeler</b></p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  08 / 29 / 2013  <b>Transaction ID : INCA11338</b></p>	
<p>Mailing Address 1215 K Street Suite 800</p>		<p>Amount of Each Receipt this Period  138.00</p>	
<p>City State Zip Code  Sacramento CA 95814</p>	<p>FEC ID number of contributing federal political committee.  C</p>		
<p>Name of Employer  California Hospital Association</p>	<p>Occupation  Vice President, Rural Healthcare/Gover</p>		
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Aggregate Year-to-Date ▼  1380.00</p>		
<p>Full Name (Last, First, Middle Initial)  <b>C. Steve Escoboza</b></p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  08 / 30 / 2013  <b>Transaction ID : INCA11366</b></p>	
<p>Mailing Address 5575 Ruffin Road  Suite 225</p>		<p>Amount of Each Receipt this Period  375.00</p>	
<p>City State Zip Code  San Diego CA 92123</p>	<p>FEC ID number of contributing federal political committee.  C</p>		
<p>Name of Employer  Hospital Association of San Diego and</p>	<p>Occupation  President/CEO</p>		
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Aggregate Year-to-Date ▼  1500.00</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>559.00</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			