

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

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

FOR LINE NUMBER: PAGE 31 OF 57

(check only one)

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

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NAME OF COMMITTEE (In Full)

USACS PAC

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

A. Little, Andrew, , ,

Mailing Address 5514 Aryshire Dr

City  
DublinState  
OHZip Code  
43017-9428FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USACS Medical Group, LTDOccupation (for Individual)  
Emergency Physician

Receipt For: 2020

☐ Primary ☐ General  
☒ Other (specify) ▼  
Other

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2020

Transaction ID : SA11AI.11218

Amount of Each Receipt this Period

300.00

☐ Memo Item  
\$100.00/Monthly

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

B. Loar, Jesse, , ,

Mailing Address 2554 E. Maplewood Ave.

City  
CentennialState  
COZip Code  
80121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Colorado Emergency Service Physicians,Occupation (for Individual)  
Co-Medical Director

Receipt For: 2020

☐ Primary ☐ General  
☒ Other (specify) ▼  
Other

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2020

Transaction ID : SA11AI.11086

Amount of Each Receipt this Period

450.00

☐ Memo Item  
\$150.00/Monthly

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

C. MacLean, Craig, , ,

Mailing Address 64 Newfields Road

City  
ExeterState  
NHZip Code  
03833-4542FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USACS Medical Group, LTDOccupation (for Individual)  
Director of Quality

Receipt For: 2020

☐ Primary ☐ General  
☒ Other (specify) ▼  
Other

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2020

Transaction ID : SA11AI.11169

Amount of Each Receipt this Period

450.00

☐ Memo Item  
\$150.00/Monthly

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

1200.00

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