

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

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

FOR LINE NUMBER: PAGE 38 OF 60

(check only one)

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

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NAME OF COMMITTEE (In Full)

DuPage Medical Group LTD PAC

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

A. Oakley, James, , ,

Mailing Address 605 S Grant St

City
Hinsdale

State
IL

Zip Code
60521-4453

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DuPage Medical Group, Ltd.

Occupation (for Individual)
Physician/Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
06 / 21 / 2019

Transaction ID : 193E9C29F6A24BC3A2DA

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Philip, Mathew, , ,

Mailing Address 1608 W North Ave
Apt. 3

City
Chicago

State
IL

Zip Code
60622-2245

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DuPage Medical Group, Ltd.

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

MM / DD / YYYY
03 / 22 / 2019

Transaction ID : 020B6B6E9776463492A3

Amount of Each Receipt this Period

39.00

☐ Memo Item

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

C. Philip, Mathew, , ,

Mailing Address 1608 W North Ave
Apt. 3

City
Chicago

State
IL

Zip Code
60622-2245

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DuPage Medical Group, Ltd.

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

468.00

Date of Receipt

MM / DD / YYYY
04 / 08 / 2019

Transaction ID : D41E6A0240C24E4C8315

Amount of Each Receipt this Period

39.00

☐ Memo Item

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

103.00

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